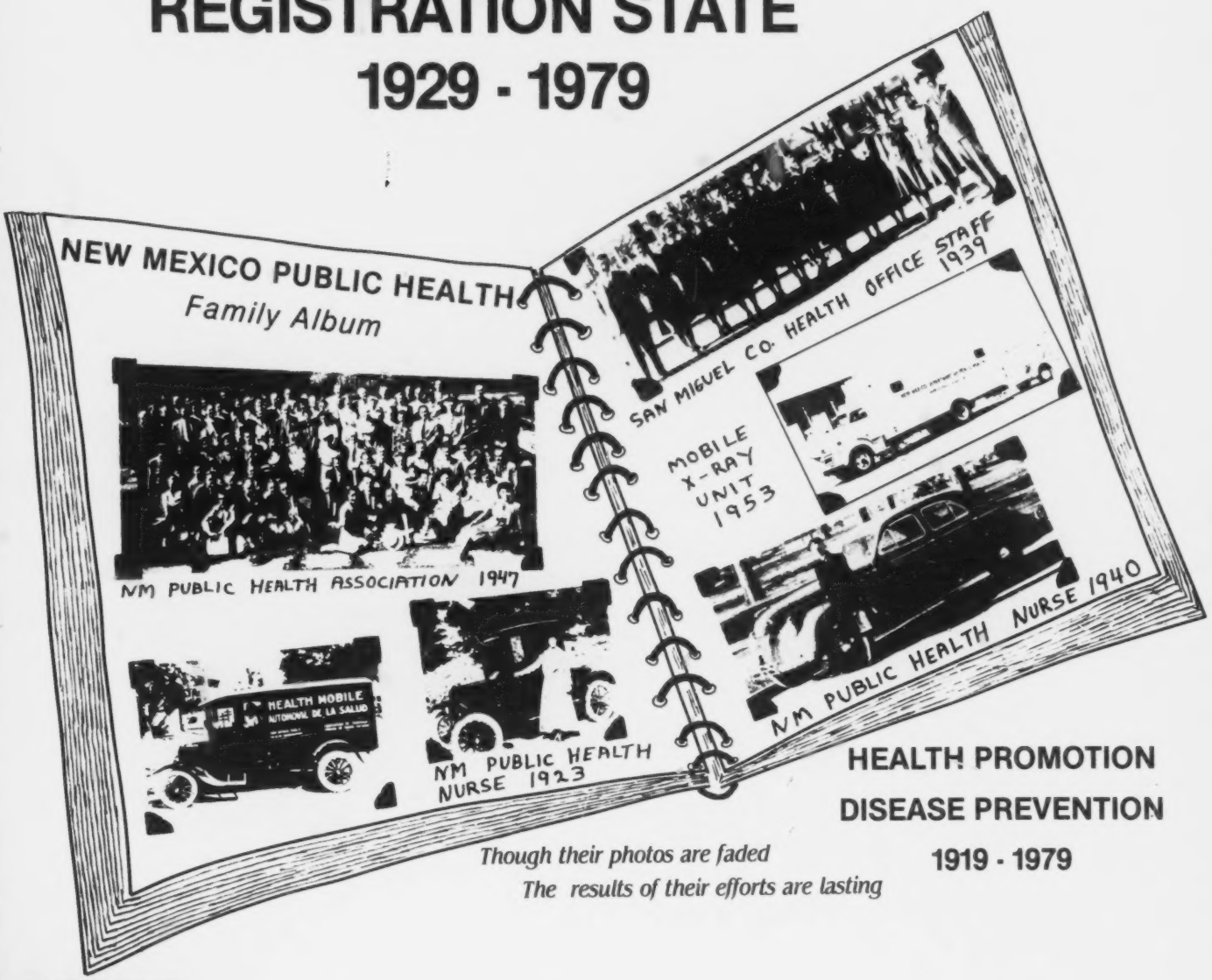
NEW MEXICO... 50 YEARS AS A VITAL STATISTIC REGISTRATION STATE 1929 - 1979


NEW MEXICO PUBLIC HEALTH
Family Album
SAN MIGUEL CO. HEALTH OFFICE STAFF 1939
MOBILE X-RAY UNIT 1953
NM PUBLIC HEALTH ASSOCIATION 1947
NM PUBLIC HEALTH NURSE 1940
HEALTH MOBILE
NM PUBLIC HEALTH NURSE 1923

HEALTH PROMOTION
DISEASE PREVENTION
1919 - 1979

Though their photos are faded
The results of their efforts are lasting

1979 NEW MEXICO SELECTED HEALTH STATISTICS

STATE OF NEW MEXICO
HEALTH AND ENVIRONMENT DEPARTMENT
HEALTH SERVICES DIVISION

ANNUAL REPORT

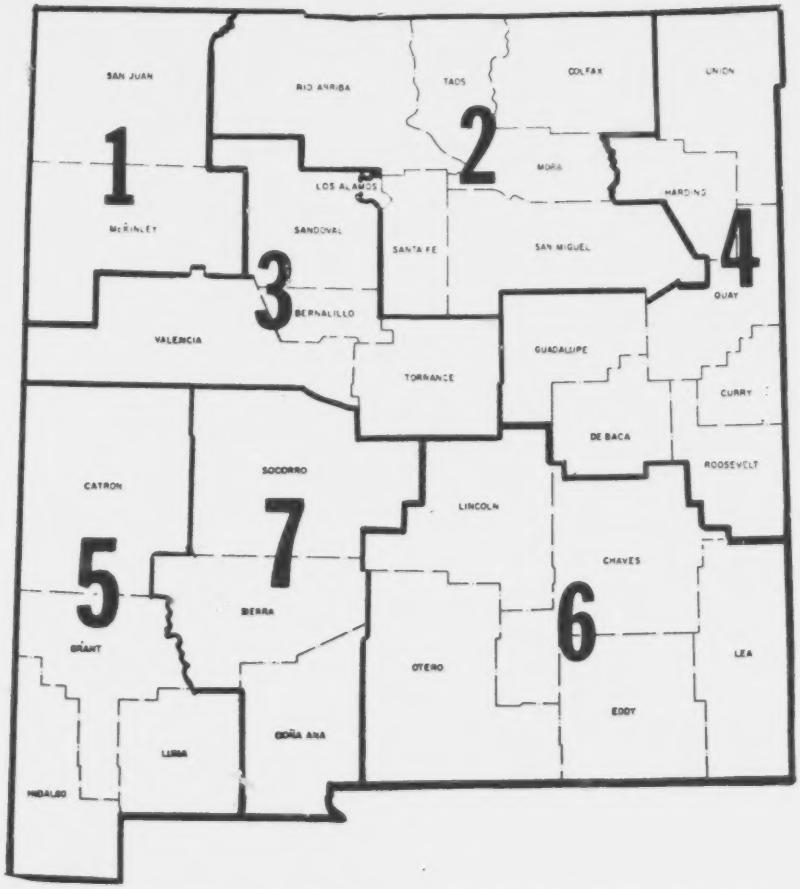
BEST AVAILABLE COPY

SELECTED HEALTH STATISTICS
NEW MEXICO 1979

This report of New Mexico Health Statistics gives an overview of selected vital and health statistics for Calendar Year 1979. To portray the patterns of temporal change, data from earlier years have also been included. The primary sources of these summary data are the reportable certificates of birth and death and the federal and state reporting systems.

Unless otherwise indicated, the tabulations of vital events are by place of residence. Thus, births and deaths of New Mexico residents that occurred in other states are included in the tabulations, while the vital events that occurred in New Mexico to non-residents are not included. 1979 tabulations are based on 1979 birth and death certificates received in the vital records office through May 15, 1980. Extending the cut-off date so late into the following year allows for the inclusion of more than 99% of the vital events occurring in 1979 into the tabulations.

The following map depicts the 1979 alignment of New Mexico counties into seven health districts in providing for the dispensation of health services at the local level. The majority of county data presented in this report are grouped according to these districts.



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HIGHLIGHTS NEW MEXICO HEALTH STATISTICS 1979

POPULATION ..... As the ninth fastest growing state during 1970-1979, New Mexico reached a 1979 population total of 1,241,000 persons ranking it 37th in total population and seventh lowest in population density. New Mexico's population remains relatively young. However, the percentage of population 65 and older is increasing at a rate over 2½ times the national figure, and this rate of growth is exceeded in only four other states.

INCOME ..... With a per capita personal income of $7,560, New Mexico ranks 38th highest among the states, but next to the last among the mountain states. 15.5% of New Mexico's families are below poverty level ranking New Mexico second highest among the states.

MARRIAGE/DIVORCE ..... New Mexico's marriage rate decreased for the second year in a row, while the divorce rate continued an increasing trend. For every 100 marriages performed in New Mexico during 1979, 59.3 divorces were granted. New Mexico experienced a 27% higher marriage rate and a 51% higher divorce rate than did the nation as w hole.

ABORTIONS ..... 4679 New Mexico resident women obtained legal induced abortions in 1979 compared with 4493 in 1978. Nearly ½ were under 20 years of age, and 55% were 20-29 years of age. 76% were unmarried, 54% had no living children, 68% had no previous abortions, and 34% obtained the abortion prior to the nintn week of gestation.

BIRTHS ..... Continuing the increasing trend begun in 1976, the state's birth rate rose to 20 births per thousand population, representing the highest number of births since 1964. New Mexico's birth rate ranked fourth highest among the states, and exceeded the national rate by 27%.

- *AGE OF MOTHER* ..... *Birth rates are higher in new Mexico than nationally for all mothers fifteen years of age and older. The percentage of births to teenage mothers in the state has decreased, but remains 11% higher than nationally.*
- *LIVE BIRTH ORDER* ..... *41.3% of births to New Mexico residents were first order births. The general long-term trend has been toward a greater percentage of first and second order births and a decrease in the percentage of third and higher order births in the State.*
- *BIRTHS TO UNWED MOTHERS* ..... *18% of the live births in New Mexico during the year were to unwed mothers. The percentage of births to unwed mothers is highest for teenagers, but it is for mothers age 20 and older that percentages in New Mexico exceed national percentages.*
- *LOW BIRTH WEIGHT* ..... *The incidence of low birth weight babies in New Mexico decreased by 7% in 1979. The State's incidence of low birth weight babies remains 14% higher than nationally, and is higher for women 15 to 39 years of age.*
- *MULTIPLE BIRTHS* ..... *There were 373 live births in multiple deliveries. New Mexico's multiple birth rate of 15 live births in multiple deliveries per 1,000 total live births was lower than the national ratio of 20.*

MORTALITY ..... Because of a younger population structure, New Mexico's crude death rates are well below national figures: age-adjustment of the rates reveals a higher mortality rate in New Mexico than nationally for both males and females.

- *LEADING CAUSES* ..... *Heart disease, cancer and accidents are the leading causes of death in New Mexico. Crude death rates for heart disease and cancer are lower for New Mexico than for the United States, but accidents account for twice the percentage of deaths in New Mexico than nationally. The State's accident fatality rate ranks second highest among the states. Mortality in the State increased in 1979 for heart disease, cancer, accidents and suicide, while decreasing for stroke and influenza/pneumonia. The suicide mortality rate reached the highest level ever recorded in New Mexico. The mortality rates for suicide, homicide, accidents, alcoholism and cirrhosis notably exceeded national rates for these causes of death. Nearly twice the percentage of deaths occurred to persons under 35 years of age in New Mexico than nationally.*
- *LIFE EXPECTANCY* ..... *Life expectancy at birth is for males 1.7 years less in New Mexico than nationally, and 1.2 years less for females. In New Mexico, females have a life expectancy 8.2 years greater than males.*

INFANT MORTALITY ..... After dropping to the lowest infant mortality rate ever recorded in the State in 1978, infant mortality increased to 14.2 infant deaths per thousand live births in New Mexico in 1979. New Mexico's rate exceeds the national rate in both the neonatal (1% higher) and postneonatal period (29% higher).

MATERNAL MORTALITY ..... 10 maternal deaths were recorded in 1979 for a rate of 40.3 maternal deaths per 100,000 live births as compared to 7.8 nationally. This is the highest number of maternal deaths in the State since 1974.

FETAL MORTALITY ..... 206 resident fetal deaths were reported during 1979 for a fetal death ratio of 8.4 fetal deaths per thousand live births. Although this represents an increase over the previous year, the State's fetal mortality ratio remains lower than nationally for all ages of mothers.

COMMUNICABLE DISEASES:

- *GONORRHEA* ..... *The number of reported cases in the State decreased for the third successive year, resulting in New Mexico's case rate dropping below the national rate for the last two years.*
- *SYPHILIS* ..... *New Mexico's case rate for all stages of syphilis has dropped 40% in the last 6 years from 47.2 to 19.1 cases per 100,000 population.*
- *PLAGUE* ..... *Four cases were reported. Fifty-six percent of all cases occurring in the United States since 1974 occurred in New Mexico.*
- *TUBERCULOSIS* ..... *The State's tuberculosis incidence rate remained unchanged from the previous year. Incidence among the Indian is much higher than for non-Indian.*
- *DIPHTHERIA* ..... *No cases have been reported in the past two years.*
- *MEASLES* ..... *38 cases were reported compared to none in 1978. Nationally, the occurrence of measles decreased to the lowest ever reported.*
- *RUBELLA* ..... *The number of cases increased from 4 in 1978 to 12 in 1979.*

DEFINITIONS

RESIDENCE DATA - Data allocated by place of residence of the decedent (deaths) or by place of residence of the child's mother (births, fetal deaths).

OCCURRENCE DATA — Data allocated by place where event occurred, regardless of the person's place of residence.

LIVE BIRTH — A birth that shows any sign of life after delivery.

LOW BIRTH WEIGHT — A live birth weighting 2500 grams (5½ pounds) or less.

FETAL DEATH — A fetal death is defined as a death in utero. New Mexico statute requires the reporting of all fetal deaths of 20 weeks or more gestation.

INFANT DEATH — Death of an infant under one year of age (neonatal + postneonatal).

NEONATAL DEATH — Death of a newborn within the first 27 days of life.

POSTNEONATAL DEATH — Death of an infant older than 27 days of age, but under one year.

MATERNAL DEATH — Death attributed to complications of pregnancy, childbirth or the puerperium.

PUERPERIUM — Period after delivery of placenta, which extends until the organs of reproduction have returned to normal, usually 6 to 8 weeks.

NATURAL INCREASE — Excess of births minus deaths.

(CRUDE) BIRTH RATE — Number of live births per 1,000 population.

FERTILITY RATE — Number of live birth per 1,000 women 15-44 years of age.

FETAL DEATH RATIO — Number of fetal deaths per 1,000 live births.

INFANT DEATH RATE — Number of infant deaths per 1,000 live births.

NEONATAL DEATH RATE — Number of neonatal deaths per 1,000 live births.

POSTNEONATAL DEATH RATE — Number of postneonatal deaths per 1,000 live births.

MATERNAL DEATH RATE — Number of maternal deaths per 100,000 live births.

(CRUDE) DEATH RATE — Number of deaths per 1,000 population.

AGE-ADJUSTED DEATH RATE (Direct Method) — Elimination of the effects of difference in age composition by adjustment of the rate to a standard.

INTRODUCTION

"We pay either for health or for the consequence of its neglect...Expenditures for sound preventitive programs are a drop in the bucket, when compared with the high cost of treating persons after the fact...Health promotion—disease prevention... (Health Promotion is an) education which has as its objective to help people acquire the knowledge and attitudes that will enable and motivate them to take appropriate action to achieve their maximum potential for health..."

Though these catchy phrases ring almost to the point of cliche in today's atmosphere of health popularity in which health has achieved the status of fad, or being "in," of extensive popularity, they are here quoted from old New Mexico Public Health Reports—some written nearly 60 years ago.

The concepts are not new. They have been promoted over the years by a minority few, and now have blossomed into an acceptance by a growing segment of the population. To those pioneers who are/were guided by these concepts, during times of popularity and during times of "lonely battles," this report is dedicated.

POPULATION

The United States population reached an estimated total of 220,099,000 people in 1979. This figure accounted for 5.1% of the total world population of 4,276 million, and ranked the nation fourth in population size worldwide. Mainland China had an estimated population count for 1979 of 1,012 million, followed by India (667), the Soviet Union (263), and then the United States.

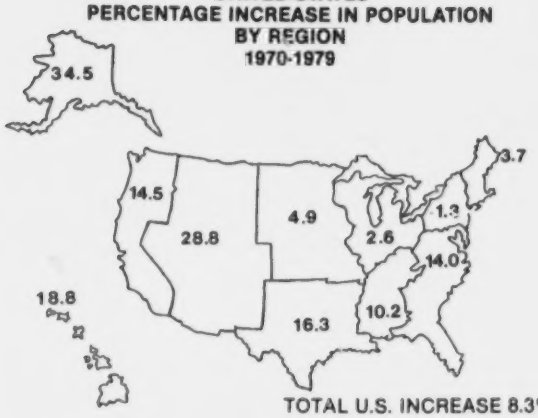
The global population growth rate has shown a decreasing trend in recent years. This trend is noted for all of the continents except Africa where the growth rate is rising. The worldwide growth rate is estimated to be between 1.6 and 1.8 (1978 estimate), though rates vary considerably by regions.

The following 1975-79 average annual growth rates by selected countries serve to provide interesting comparisons: United States 0.8, Soviet Union 0.9, Australia 1.2, United Kingdom 0.0, Sweden 0.3, France 0.3, Canada 1.0, Venezuela 3.3, Mexico 2.8, Cuba 1.3, Brazil 2.4, Thailand 2.4, Saudi Arabia 6.1, Japan 0.9, India 2.0, Taiwan 2.0, Mainland China 1.6, Kenya 3.9, Zambia 3.2, Egypt 2.7, Federal Republic of Germany -0.2, and Switzerland -0.2.

During the Seventies the United States has experienced an average annual growth rate of 0.8, though 1979 showed a growth rate of 0.9 reflecting an increase in birth rates for that year. From 1970 to 1979, the nation's population increased by 16.9 million persons—a total increase of 8.3%.

The southern part of the country accounted for over half (52%) of the nation's growth during this period. The West claimed 38% of the growth while the Northeastern region registered a population decline.

FIGURE 1.1
UNITED STATES
PERCENTAGE INCREASE IN POPULATION
BY REGION
1970-1979



TOTAL U.S. INCREASE 8.3%

Three states, (all in the Northeastern region)—Rhode Island, New York, Pennsylvania—decreased in population between 1970 and 1979.

Alaska and the Mountain division exhibited the largest percentage increases in population during this nine year period (Figure 1.1). Latest single year growth rates reflect the same pattern, with high rates in the Mountain (3.0), Pacific (2.0), and West South Central (2.0), divisions and low rates of -.3 to .5 in the divisions of Northeastern and North Central regions.

Examination of Table 1.1 re-emphasizes the rapid growth of the western part of the nation. Nine of the ten fastest growing states are in the West; seven of the eight Mountain states are in the top ten; the three fastest growing states in the nation are Mountain states. New Mexico ranked as the ninth fastest growing state.

Outside of these ten states, the only others exceeding a 14% growth rate during this time were New Hampshire (20.2), Texas, (19.5), Washington (15.2), and Hawaii, (18.8). The country's largest state (California), increased by 13.7%, and New York, the second largest, decreased by 3.3%.

TABLE 1.1
TEN FASTEST GROWING STATES
1970-1979

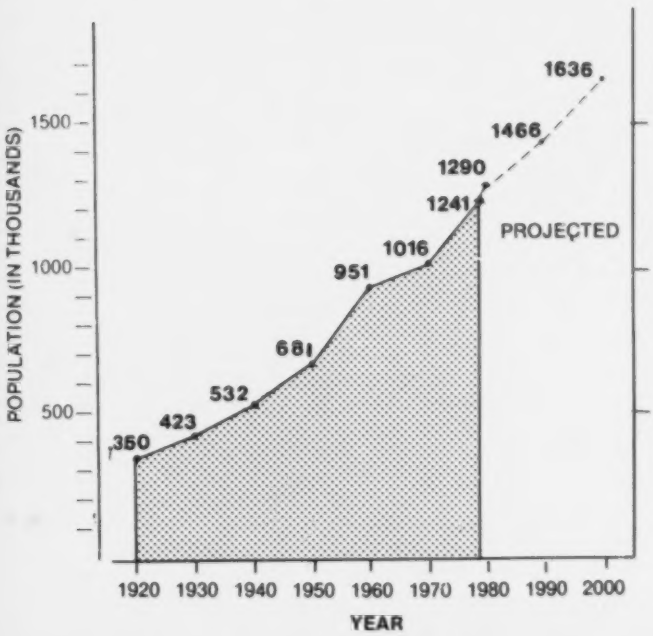
RANK	STATE	PERCENT INCREASE 1970-1979
1	Nevada	43.6
2	Arizona	38.2
3	Wyoming	35.3
4	Alaska	34.5
5	Florida	30.5
6	Utah	29.1
7	Idaho	26.9
8	Colorado	25.6
9	New Mexico	22.2
10	Oregon	20.8

SOURCE: Bureau of Census

Most recent single year growth rates show that between 1978 and 1979, Wyoming led the nation with a growth rate of 5.9, followed by Nevada with 5.4, Utah 3.8, Washington 3.5, Arizona 3.2, and Oregon 3.1. New Mexico ranked eleventh with an annual growth rate of 2.1 for that one year time period, while 12 states, mainly from the Northeastern and North Central regions, lost population last year.

New Mexico's population has continued to increase over the years (Figure 1.2), however the rate of growth and the components of growth have shown notable variation.

FIGURE 1.2
NEW MEXICO
POPULATION COUNTS, ESTIMATES, PROJECTIONS
1920-2000



CENSUS YEARS 1920-70 TAKEN FROM BUREAU OF CENSUS COUNTS. 1979 ESTIMATE FROM CURRENT POPUALTION REPORTS, P-25, BUREAU OF CENSUS. , 1990, 2000 PROJECTIONS, P-25, NO. 735, BUREAU OF CENSUS, SERIES 11-B.

As shown in Table 1.2, New Mexico, during the Fifties, experienced a period of rapid growth (37.6% increase) due to a high rate of natural increase (excess of births over deaths) coupled with a high in-migration. During the Sixties, the State's growth continued but at a much slower rate, due in part to the lower birth rates of the period, but mainly reflecting the impact of the out-migration experienced in New Mexico during the Sixties. The Seventies has been a period of tremendous growth for the State.

Though birth rates, and therefore natural increase, have been generally lower than those of previous periods, the renewed increase in the migration component of the State's population increase which though not as high as that of the Fifties, is 3½ times higher than that for the Sixties.

The population change from 1978 to 1979, was the third highest annual growth rate experienced in the State during the last nineteen years, and represented an increase of 29,000 persons—the second largest number during this time. Most notable is the increase in the rate of migration for 1978-79 which is over twice that noted for the previous year, and the highest since 1972-73.

Because of the generally lower birth rates experienced in New Mexico during the Seventies, in-migration has played an increasingly important role in the State's growth, accounting for 94,000 (42%) of the State's total population increase of 224,000 persons between 1970 and 1979.

From what states do these people migrate to New Mexico? According to the Bureau of the Census, 20.3% had previously resided in Texas, 12.5% in California, 10.4% in Arizona, 8.0% in Colorado and 3.3% in New York.

TABLE 1.2
NEW MEXICO
COMPONENTS OF POPULATION CHANGE
1950-1979

TIME PERIOD	NET CHANGE		COMPONENTS OF CHANGE (%)	
	NUMBER (Persons)	PERCENT	NATURAL INCREASE	NET MIGRATION
1970-79	224,000	22.0	12.7	9.3
1978-79	29,000	2.4	1.3	1.1
1977-78	22,000	1.8	1.3	.5
1976-77	22,000	1.9	1.2	.7
1975-76	21,000	1.8	1.1	.7
1974-75	25,000	2.2	1.2	1.0
1973-74	23,000	2.1	1.2	.9
1972-73	33,000	3.1	1.2	1.9
1971-72	21,000	2.0	1.4	.6
1970-71	27,900	2.7	1.4	1.3
1969-70	6,100	.6	1.4	.4
1960-69	60,000	6.3	18.1	-11.8
1968-69	17,000	1.7	1.5	.1
1967-68	- 6,000	- .6	1.4	- 2.0
1966-67	- 7,000	- .7	1.5	- 2.2
1965-66	- 5,000	- .5	1.7	- 2.2
1964-65	6,000	.6	2.0	- 1.4
1963-64	17,000	1.7	2.1	- .4
1962-63	10,000	1.0	2.3	- 1.3
1961-62	14,000	1.5	2.5	- 1.0
1960-61	14,000	1.5	2.5	- 1.0
1950-59	256,000	37.6	26.2	11.4

The Mountain division as a whole has been experiencing the highest in-migration rate of any division of the country. 57% of the division's growth from 1978 to 1979 was due to in-migration. Nevada, the fastest growing state in that year, experienced an in-migration which accounted for 83% of that state's growth. In-migration also accounted for 83% of Arizona's growth, while in the Mountain states of Idaho, Utah, Montana and New Mexico natural increase was the major component of growth. States outside the Mountain division experiencing a large in-migration component of growth include Washington, Oregon, Florida and New Hampshire. Twenty-seven states recorded a net out-migration during the year. The New England, the Middle Atlantic, and the East North Central divisions all experienced net out-migration.

The effect of the changing components of New Mexico's population growth has been to create changes in the structural composition of the State's population. Because of the general decrease in birth rates, the increased life span, and the increased rate of the in-migration component of population change, the age distribution of New Mexico's population has changed over the years.

The most notable change is the increased percentage of older population. From 1950 to 1979 (Table 1.3), the percentage of the State's population over 65, increased by 80%. The percentage 55-64 increased 36%, while the percentage of population under 5 decreased by 35%.

TABLE 1.3
NEW MEXICO POPULATION
PERCENTAGE DISTRIBUTION BY AGE GROUP
NEW MEXICO RESIDENTS
1950-1979

AGE GROUP	1950	1960	1970	1975	1978	1979
< 5	13.9%	14.3%	9.5%	9.0%	8.8%	9.0%
5-14	20.9	23.6	23.8	19.9	17.9	17.5
15-24	16.9	15.1	18.5	20.6	20.9	20.8
25-34	15.8	13.9	12.3	13.6	14.7	14.8
35-44	12.7	12.5	11.4	10.9	10.9	10.9
45-54	8.9	9.2	10.0	10.3	10.1	10.0
55-64	6.1	5.9	7.5	7.9	8.2	8.3
65 +	4.9	5.4	6.9	7.8	8.6	8.8

SOURCE: Data based on the Bureau of Census figures.

Figure 1.3 graphically illustrates the growth rates of various age groups of the State's population during 1970-79. New Mexico's 65 and older population is the fastest growing of any age group and the rate of increase is over 2 1/2 times the national rate of increase for this age group. Only four states, Nevada, Arizona, Florida, and Hawaii showed a faster rate of growth for the 65 and older portion of their populations than did New Mexico during this time period.

New Mexico's rate of growth for the 45-64 age group is over 5 1/2 time the national rate of increase for this age group (Figure 1.3) and ranks fifth highest among the states.

Population projections indicate a continuing increase in the percentage of older age groups in the State, while younger age groups will comprise decreasing percentages of New Mexico's population (Table 1.4).

FIGURE 1.3
PERCENTAGE POPULATION CHANGE
BY AGE GROUP
1970-1979
NEW MEXICO AND UNITED STATES

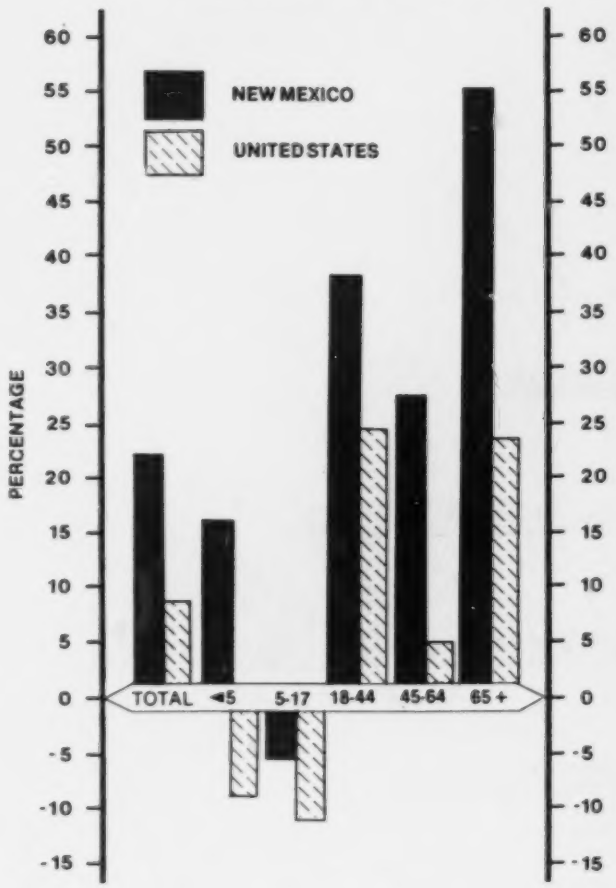


TABLE 1.4
NEW MEXICO
PROJECTED POPULATION DISTRIBUTION
PERCENTAGE BY AGE GROUP
1979, 1980, 1990, 2000

AGE GROUP	ESTIMATED	PROJECTED*			% CHANGE
	1979	1980	1990	2000	1979 TO 2000
< 5	9.0%	8.9%	8.8%	7.2%	- 20.0%
5-14	17.5	17.0	16.2	16.1	- 8.0
15-24	20.8	20.5	15.1	15.0	- 27.9
25-34	14.8	15.6	16.6	12.8	- 13.5
35-44	10.9	11.1	14.0	15.1	+ 38.5
45-54	10.0	10.0	10.0	13.1	+ 31.0
55-64	8.3	8.5	8.5	8.9	+ 7.2
65 +	8.8	9.0	10.8	11.8	+ 34.1

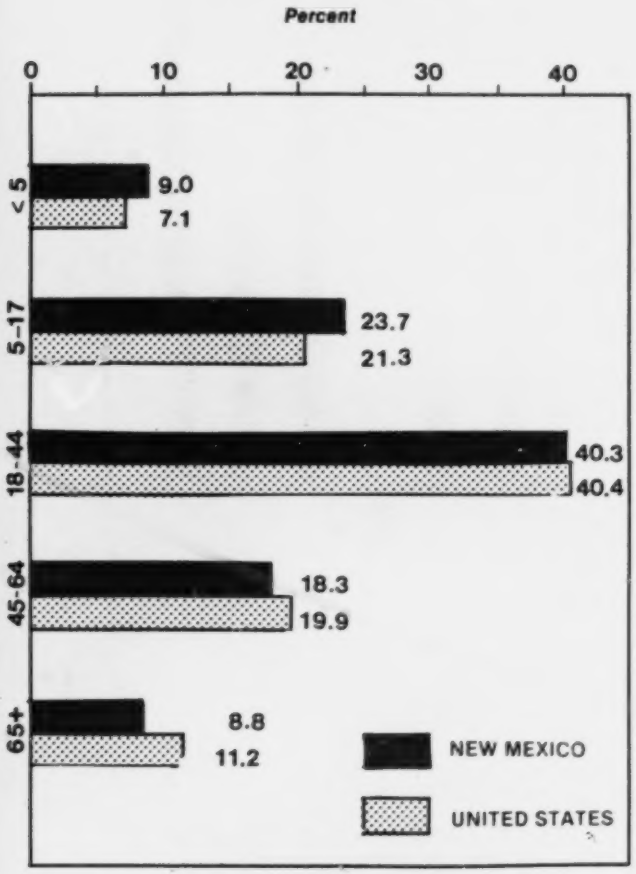
* 1980, 1990, 2000, Projections from "Population Estimates and Projections" P-25, No. 796, Bureau of Census.

Despite the changing age structure, New Mexico's population remains comparatively young. Comparison of 1979 state population data reveals that only three states—Utah, Alaska, and Mississippi—have a larger percentage of population under 18 years of age than does New Mexico, and only six states, Alaska, Hawaii, Utah, Wyoming, Colorado and Nevada—have proportionately fewer people 65 years of age or older.

Whereas 28% of the U.S. population in 1979 is under 18 years of age, 33% of New Mexico's population falls into that age bracket (Figure 1.3).

The percentage of population age 65 and older is over 20% lower in New Mexico than nationally—8.8% as compared with 11.2%.

FIGURE 1.4
1979 POPULATION
AGE DISTRIBUTION
NEW MEXICO AND UNITED STATES



SOURCE: BUREAU OF CENSUS CURRENT POPULATION REPORTS, P 25

The State's relatively young age structure is evident on the county level. Three-fourths of the State's counties have in excess of 40% of their population comprised of individuals under 20 years of age. Fifth-two percent of McKinley County's population is under 20 years of age. Of all the State's counties, only in Sierra County is the percentage of population under 20 years of age less than that of the nation as a whole.

Only 11 of New Mexico's counties exceeded the national percentage of population in the 65 and older age group. One-fourth of Sierra County's population is 65 or older. In six counties, the percentage is less than half of the national percentage. Los Alamos County showed the smallest percentage with just about 2% of the county population being 65 years of age or older.

TABLE 1.5
NEW MEXICO
POPULATION PERCENTAGE DISTRIBUTION
BY AGE GROUP BY COUNTY
1979

	COUNTY	PERCENTAGE DISTRIBUTION BY AGE				
		< 5	5-19	20-44	45-64	65 +
	UNITED STATES	7.1%	25.2%	36.6%	19.9%	11.2%
	NEW MEXICO	9.0	29.2	34.7	18.3	8.8
HEALTH DISTRICTS 1	MCKINLEY	12.9	38.9	30.5	13.4	4.4
	SAN JUAN	10.9	38.2	30.4	15.5	5.1
2	COLFAX	8.5	32.3	25.2	21.7	12.3
	LOS ALAMOS	8.6	35.6	33.3	20.5	2.1
	MORA	9.3	37.7	22.2	18.8	11.9
	RIO ARRIBA	10.7	38.0	28.1	15.9	7.4
	SAN MIGUEL	8.3	34.6	30.0	17.1	9.9
	SANTA FE	9.2	33.5	31.6	17.8	7.8
	TAOS	9.9	35.8	27.7	17.2	9.3
3	BERNALILLO	9.1	33.0	33.9	17.8	6.1
	SANDOVAL	11.3	37.0	27.9	16.6	7.2
	TORRANCE	7.5	33.6	24.9	22.2	11.9
	VALENCIA	11.0	36.8	31.2	15.5	5.6
4	CURRY	9.7	31.3	36.5	15.0	7.4
	DE BACA	5.6	29.5	22.0	24.9	18.2
	GUADALUPE	9.3	37.9	25.7	17.7	9.3
	HARDING	6.2	32.3	23.3	23.5	14.5
	QUAY	8.1	30.7	25.8	22.9	12.5
	ROOSEVELT	7.6	31.2	33.1	18.2	9.9
	UNION	7.5	30.2	24.8	22.0	15.3
5	CATRON	8.8	29.3	26.2	23.6	12.4
	GRANT	10.0	32.5	30.9	18.7	7.9
	HIDALGO	10.9	33.9	27.3	19.1	8.7
	LUNA	9.2	33.8	25.7	21.0	10.2
6	CHAVES	8.7	34.2	28.2	19.9	9.0
	EDDY	8.2	33.2	27.9	21.8	8.9
	LEA	9.0	33.5	32.4	19.7	5.4
	LINCOLN	7.7	28.8	26.8	25.2	11.6
	OTERO	10.3	34.6	37.3	13.8	4.1
7	DONA ANA	9.9	35.7	35.1	14.0	5.3
	SIERRA	6.9	23.5	20.9	23.9	24.7
	SOCORRO	9.8	35.3	30.6	16.6	7.7

Torrance County showed the largest percentage population increase for the period 1970-79 (Table 1.6). San Juan ranked a close second behind Torrance with a population increase of 49.5%. Four counties registered decreases in total population—Mora, Guadalupe, Harding, and Union.

The components affecting the county population changes varied from county to county. In the fastest growing county (Torrance) in-migration accounted for 85% of population growth, while in San Juan, the second fastest growing, migration accounted for 60% of growth. Other counties in which in-migration accounted for a substantial portion of growth were: Los Alamos, Sandoval, Torrance, Valencia, Catron, Luna, Chaves, Lincoln and Sierra. McKinley County is notable in that though it ranked as one of the faster growing counties, migration accounted for only 36% of the growth.

Slightly more than 1/3 of the State's counties experienced out-migration during 1970-79. The counties with overall population losses were those in which the natural increase component was not sufficiently large to negate the loss due to out-migration.

Thirteen of New Mexico's counties exceeded the overall State growth rate during this period—four of them doubling, or nearly doubling the rate.

Though not the fastest growing Bernalillo County remained by far the State's most populous county, followed by Dona Ana, San Juan, and Santa Fe. In all, eight counties exceeded 50,000 in population, accounting for 68% of the State's population in 1979. Harding County was the least populated of New Mexico's counties (Table 1.6).

TABLE 1.6
NEW MEXICO
ESTIMATES OF POPULATION
BY COUNTY
1979

HEALTH DISTRICTS	COUNTY	1979 ESTIMATE	1970 CENSUS	NET CHANGE 1970 - 1979 Number	NET CHANGE 1970 - 1979 Percent	COMPONENTS OF CHANGE 1970 - 1979 Natural Increase* %	COMPONENTS OF CHANGE 1970 - 1979 Net Migration %
NEW MEXICO		1,241,000	1,017,055	224,000	22.0	12.7	9.3
1	MCKINLEY	59,100	43,208	15,900	36.8	23.7	13.1
1	SAN JUAN	78,500	52,517	26,000	49.5	20.1	29.4
2	COLFAX	13,100	12,170	900	7.3	7.0	0.3
2	LOS ALAMOS	18,700	15,198	3,500	22.9	8.4	14.5
2	MORA	4,600	4,673	Z	- 0.6	5.9	- 6.5
2	RIO ARRIBA	28,500	25,170	3,300	13.1	15.4	- 2.3
2	SAN MIGUEL	22,600	21,951	600	2.9	10.5	- 7.6
2	SANTA FE	67,600	54,774	12,900	23.5	12.5	11.0
2	TAOS	20,000	17,516	2,500	14.3	12.0	2.3
3	BERNALILLO	389,300	315,774	73,500	23.3	11.6	11.7
3	SANDOVAL	25,000	17,492	7,600	43.2	17.2	26.0
3	TORRANCE	8,000	5,290	2,700	50.8	7.5	43.3
3	VALENCIA	56,500	40,576	15,900	39.2	15.6	23.6
4	CURRY	42,100	39,517	2,600	6.6	16.5	- 9.9
4	DE BACA	2,700	2,547	100	4.2	- 0.6	4.8
4	GUADALUPE	4,800	4,989	- 100	- 2.5	7.6	-10.1
4	HARDING	1,100	1,398	- 200	-17.1	0.7	-17.8
4	QUAY	11,100	10,903	200	1.6	4.2	- 2.6
4	ROOSEVELT	16,600	16,479	100	0.5	7.9	- 7.9
4	UNION	4,800	4,925	- 200	- 3.2	2.9	- 6.1
5	CATRON	2,700	2,198	500	22.6	7.4	15.2
5	GRANT	24,900	22,030	2,900	13.2	13.1	0.1
5	HIDALGO	5,800	4,734	1,100	23.0	16.0	7.0
5	LUNA	14,500	11,706	2,800	23.5	10.3	13.2
6	CHAVES	51,300	43,335	7,900	18.3	7.2	11.1
6	EDDY	48,100	41,119	7,000	16.9	8.8	8.1
6	LEA	55,400	49,554	5,900	11.9	12.7	- 0.8
6	LINCOLN	10,800	7,560	3,300	43.2	8.9	34.3
6	OTERO	43,300	41,097	2,200	5.3	16.8	-11.5
7	DONA ANA	90,300	69,773	20,600	29.5	15.4	14.1
7	SIERRA	8,700	7,189	1,500	21.4	- 7.5	28.9
7	SOCORRO	10,800	9,763	1,100	11.0	12.5	- 1.5

*/ Excess of births minus deaths; net migration is the difference between net change and natural increase.

Z/ Less than 50 persons.

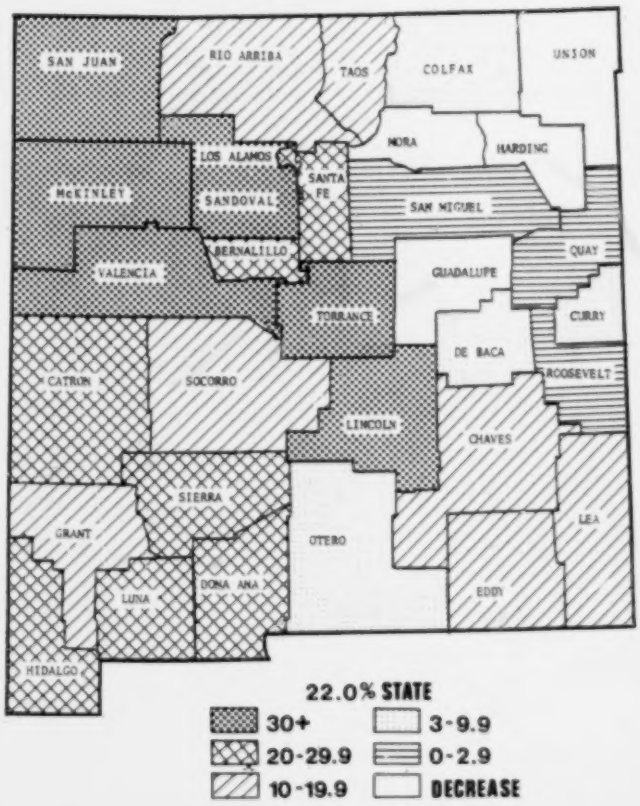
State estimates are to the nearest thousand; county estimates to the nearest hundred.

SOURCE: BUREAU OF CENSUS, CURRENT POPULATION REPORT

A graphical presentation of the growth rates for New Mexico's counties during 1970-79 is shown in Figure 1.5.

District I which is composed of the State's second and sixth fastest growing counties showed the greatest percentage increase in population during this period. District 7 which includes New Mexico's second most populous county only slightly edged out District 3, the State's most populous district, as second fastest growing. Six out of the seven counties in District 6, experienced out-migrations resulting in that district's low increase of 3% for the period.

FIGURE 1.5
NEW MEXICO
PERCENTAGE CHANGE IN POPULATION
BY COUNTY
1970-1979



Although the percentage of population increase, as shown in Figure 1.5, does indicate a rate of change of a county's population in relation to its own previous population, it does not provide an indication of the actual population involved.

Torrance County, the fastest growing county in the State during this period, increased in population by 50.8% during 1970-79, an increase of 2700 persons. San Juan, the second fastest growing, increased in population by 49.5% for an actual population increase of 26,000 persons—nearly 10 times more than the number for Torrance. Because of the already high population figure in San Juan County, its increase did not register as high a percentage change as did the increase for Torrance County.

In actual number of people, Bernalillo County registered the largest gain in the State during the period 1970-79.

Of the State's total population increase of 224,000 persons during the period 1970-79, Bernalillo County accounted for 32.8% or 73,500 persons. San Juan County received 11.6% of the State's total increase, while Dona Ana County accounted for another 9% of the total.

Figure 1.6 graphically depicts the contribution by each of the counties toward the overall State increase. As noted, Bernalillo, San Juan, and Dona Ana were the largest contributions, together accounting for over 45% of the State's population increase. These three counties plus, McKinley, Santa Fe, and Valencia accounted for neary 3/4 of the population increase in New Mexico during the period 1970-79. The remainder of the increase was distributed over 22 counties, as four counties suffered losses in population.

District III accounted for 45% of the State's population increase. Together the six counties of District I and III, combined for 63% of the total State growth.

As noted earlier, population changes are composed of two factors: natural increase and net migration. During 1970-79, 94,000 persons were added to the State's population as a result of migration. This number was 42% of the total population change. In having natural increase as the dominant growth factor, New Mexico differed from the other faster growing states. However, the State's fastest growing counties did rely heavily upon in-migration for growth.

Nearly 40% of New Mexico's in-migration was to Bernalillo County, while San Juan County accounted for another 17%. Overall, seven counties accounted for 90% of the State's in-migration component of growth.

Twelve of the State's counties experienced out-migrations during the period 1970-79. The largest lossess of population due to out-migration occurred in Curry County, which lost 3900 people through out-migration, and Otero County, 4700.

The great part of migration, then, is to the State's northwest corner, Bernalillo County and adjoining areas, Santa Fe County, and Chaves and Dona Ana in the South.

FIGURE 1.6
NEW MEXICO
PERCENTAGE DISTRIBUTION
OF POPULATION INCREASE
1970-1979

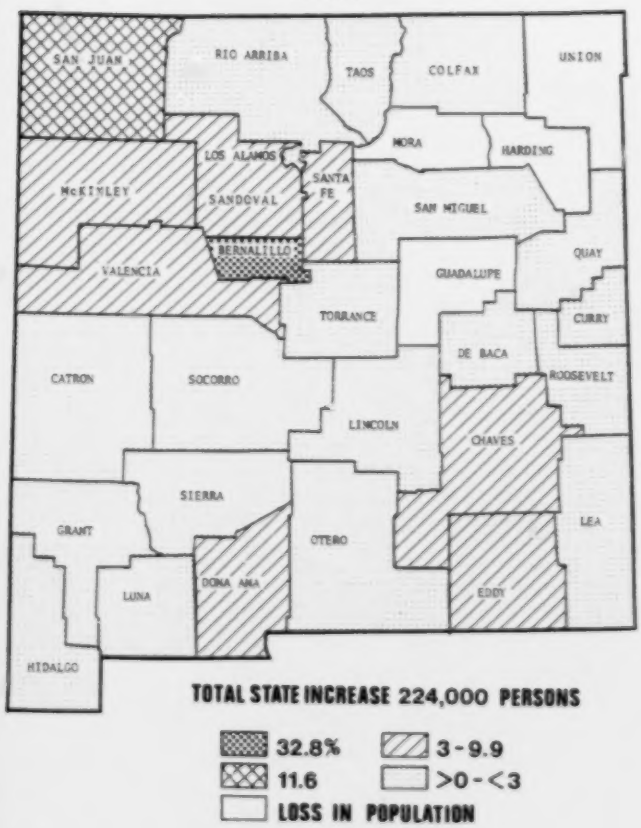
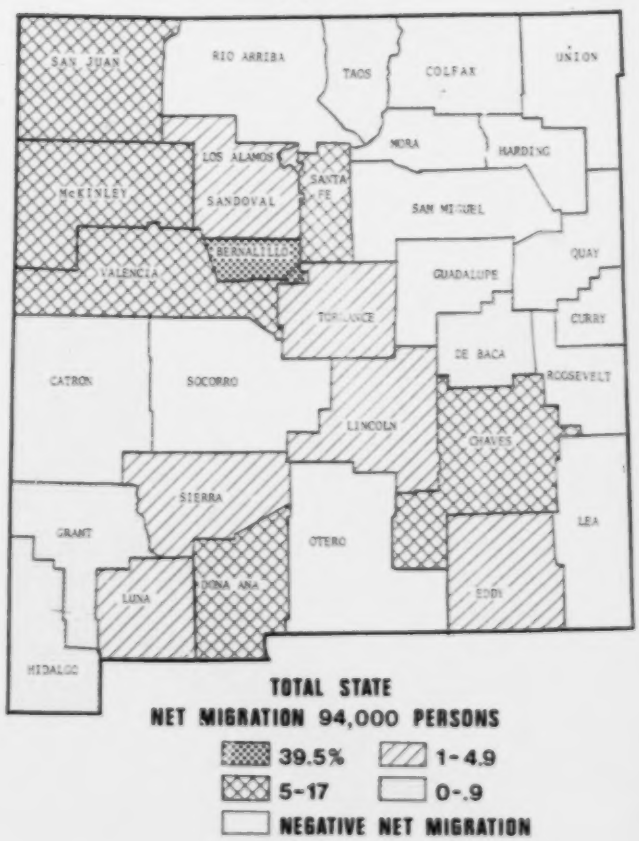


FIGURE 1.7
NEW MEXICO
PERCENTAGE DISTRIBUTION
OF NET MIGRATION
1970-1979

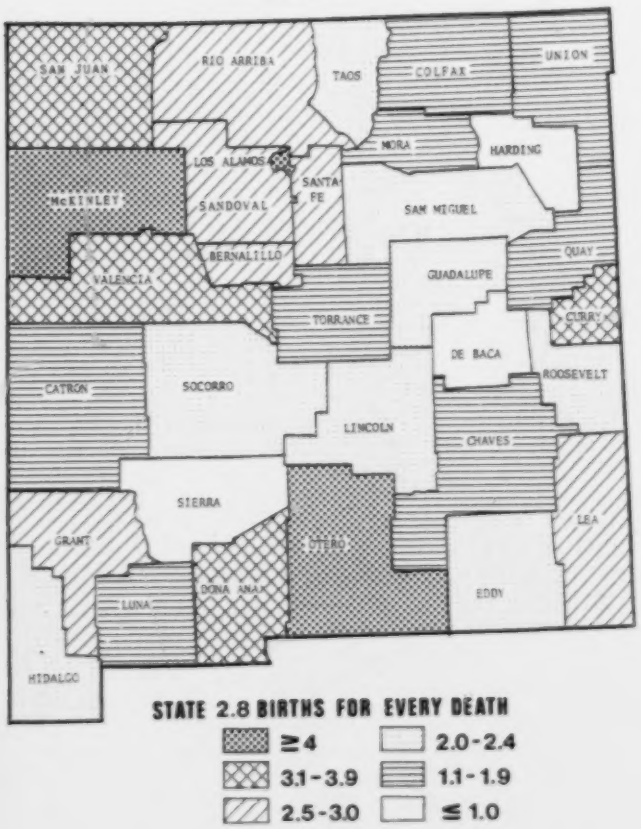


Though 12 of the State's counties experienced out-migration during 1970-79, only three counties, as noted earlier, experienced overall losses in population, as the natural increase component of the other counties compensated for their own out-migration.

All but six of New Mexico's counties exceeded the national rate for natural increase—1.7 births for every death. Only in three counties did the number of births not exceed the number of deaths (Figure 1.8), as natural increase ranged from about 1/2 a birth for every death in Sierra County, to four births for every death in McKinley and Otero Counties.

Almost half of the counties, exceeded the world rate of natural increase (2.4), and four counties equaled or exceeded the 3.7 rate for Latin American which was the highest of the continents (based on latest available figures).

FIGURE 1.8
NEW MEXICO NATURAL INCREASE
BIRTH TO DEATH RATIO
(Number of Births for Every Death)
AVERAGE BY COUNTY
1970-1979



So far then, the Seventies has seen migration out of twelve of the State's counties. Because of high rates of natural increase all but three of the State's counties have experienced overall population increases resulting in a total State increase of 22% (224,000) persons, between 1970 and 1979.

County population projections to 1990 indicate that Hidalgo and Sandoval Counties will experience the fastest growth rates of any of the counties, 62% and 58%. However, Bernalillo County will remain New Mexico's most populous county—approaching the half-million mark by 1990 (Table 1.7).

By 1990, San Juan and Dona Ana are projected to have entered the hundred thousand bracket. Three counties are projected to experience population declines by 1990, while the projections indicate that two other counties will remain at the same level.

The ranking by most populous will remain unchanged for the top six counties—Bernalillo, Dona Ana, San Juan, Santa Fe, McKinley, Valencia,—but by 1990 Chaves will have replaced Lea in seventh place, according to the projections.

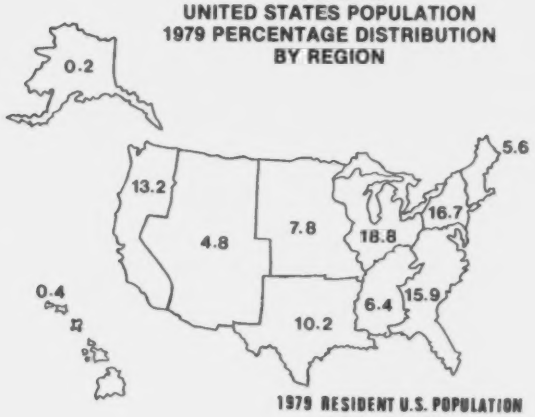
TABLE 1.7
NEW MEXICO
PROJECTED COUNTY POPULATIONS
1979-1990

HEALTH DISTRICTS	COUNTY	1979 ESTIMATE	1990 PROJECTION	% CHANGE 1979-1990
1	MCKINLEY	59,100	83,900	42.0
	SAN JUAN	78,500	110,800	41.1
2	COLFAX	13,100	14,300	9.2
	LOS ALAMOS	18,700	19,300	3.2
	MORA	4,600	5,300	15.2
	RIO ARRIBA	28,500	34,200	20.0
	SAN MIGUEL	22,600	25,400	12.4
	SANTA FE	67,600	86,700	28.3
	TAOS	20,000	24,500	22.5
3	BERNALILLO	389,300	496,800	27.6
	SANDOVAL	25,000	39,500	58.0
	TORRANCE	8,000	10,000	25.0
	VALENCIA	56,500	73,100	29.4
4	CURRY	42,100	44,400	5.5
	DE BACA	2,700	2,500	- 7.4
	GUADALUPE	4,800	4,600	- 4.2
	HARDING	1,100	900	-18.2
	QUAY	11,100	11,200	0.9
	ROOSEVELT	16,600	17,200	3.6
	UNION	4,800	4,900	2.1
5	CATRON	2,700	3,100	14.8
	GRANT	24,900	29,900	20.1
	HIDALGO	5,800	9,400	62.1
	LUNA	14,500	19,700	35.9
6	CHAVES	51,300	60,200	17.3
	EDDY	48,100	52,900	10.0
	LEA	55,400	56,200	1.4
	LINCOLN	10,800	15,300	41.7
	OTERO	43,300	45,600	5.3
7	DONA ANA	90,300	114,600	26.9
	SIERRA	8,700	11,700	34.5
	SOCORRO	10,800	10,700	- 0.9

SOURCE OF 1990 PROJECTIONS: "Estimates and projections of the population of New Mexico by county, 1975-1990," prepared by Lynn Wombold, Bureau of Business and Economic Research, UNM, 1979.

The nation's most populous states in 1979 were California (22.7 million), New York (17.6 million), Texas (13.4 million), Pennsylvania (11.7 million), and Illinois (11.2 million). In general, the states of the eastern U.S. are more populous than those of the West, and though the Mountain region is the fastest growing region in the nation, in 1979 less than 5% of the total United States population resided in the Mountain region (Figure 1.9).

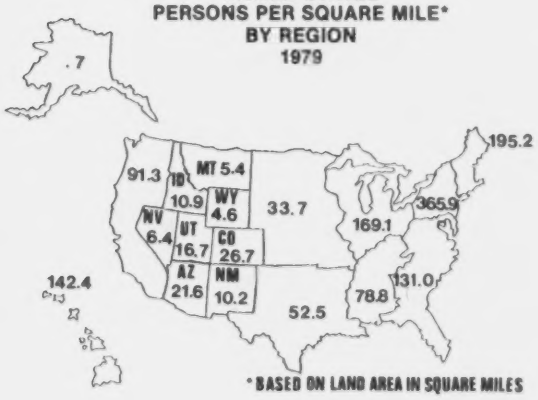
FIGURE 1.9
UNITED STATES POPULATION
1979 PERCENTAGE DISTRIBUTION
BY REGION



1979 RESIDENT U.S. POPULATION
220,099,000

Such a relatively small percentage of the nation's population residing in the vast expanse of the Mountain region results in that region being the least densely populated in the nation. New Mexico, in spite of its population growth, is one of the less densely populated Mountain States with a population density of about 10 persons per square mile (Figure 1.10).

FIGURE 1.10
UNITED STATES
PERSONS PER SQUARE MILE*
BY REGION
1979

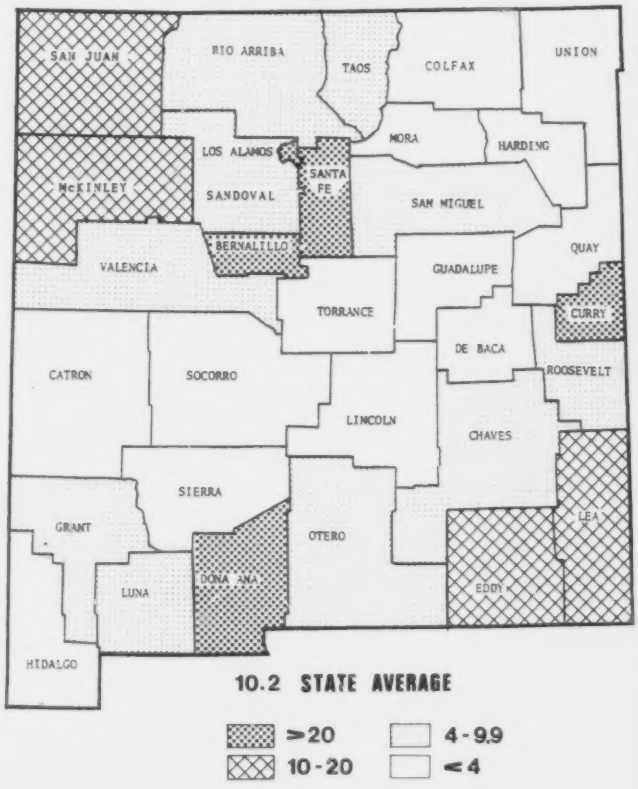


*BASED ON LAND AREA IN SQUARE MILES

New Mexico's county population densities ranged from a high of 333 persons per square mile in Bernalillo County to less than half a person per square mile in Catron County (Figure 1.11).

Only 9 of the State's counties exceeded the State overall average population density of 10.2 persons per square mile. Five states exceeded a density of twenty persons per square mile, while half the counties displayed densities below 1/2 the overall State figure.

FIGURE 1.11
NEW MEXICO
POPULATION DENSITY BY COUNTY
PERSONS PER SQUARE MILE
1979



Much of the State's population is classified as rural. According to the 1970 Cenus, in nine of the State's counties over 99% of the population is classified as rural. In only five counties is less than 25% of the population classified as rural.

According to latest available estimates (1978) there are in New Mexico only six cities with populations in excess of 30,000 people. Albuquerque by far and away the largest city in the State, had an estimated 1978 population of 295,150 persons, Santa Fe, Las Cruces, Roswell, Farmington and Clovis, make up the remainder of cities exceeding 30,000. Three cities had populations estimated to be in the twenty thousands, five in the ten thousands, and nine cities over five thousand but under ten thousand in population in 1978.

Ethnically, New Mexico's population is composed of four major components: non-Hispanic White comprise 51.5% of the State's population, the Hispanic 38.1%, the Indian 7.7% and the Black 1.9% (Table 1.8).

TABLE 1.8
NEW MEXICO
ETHNIC/RACIAL COMPOSITION
1970 CENSUS AND 1979 ESTIMATE

ETHNIC/RACE	PERCENTAGE	
	1970 CENSUS	1979 ESTIMATE*
WHITE	90.1	89.6
Non-Hispanic	*50.0*	*51.5*
Hispanic	*40.1*	*38.1*
BLACK	1.9	1.9
INDIAN	7.2	7.7
OTHER	.8	.8

* Estimates of 1979 New Mexico population developed by the New Mexico Tumor Registry.

As noted from the data of Table 1.8, some shift in the percentage composition of the State's ethnic makeup has occurred since 1970.

These data indicate that: the Indian have been the fastest growing of the State's ethnic groups during 1970-79 due to a high rate of natural increase and now compose 7.7% of the State's population; the non-Hispanic White were second fastest growing comprising over 50% of New Mexico's population, though a comparatively low rate of natural increase is over shadowed by a large in-migration component of growth; the Black continue to comprise about 2% of the State's population maintaining this level through natural increase growth; the Hispanic White comprise 38% of the State's population, a percentage which has decreased in the Seventies, for though experiencing a high rate of natural increase, the Hispanic have not only not experienced in-migration but show a slight out-migration of population (Table 1.9).

TABLE 1.9
NEW MEXICO
POPULATION GROWTH CHARACTERISTICS
BYETHNICITY1970-79

ETHNIC/RACE	NET POPULATION INCREASE 1970-79 %	NATURAL INCREASE		NET MIGRATION
		BIRTHS/ 1 DEATH	%	
ALL RACES	22.[illegible]	2.8	12.7%	9.3
WHITE	21.2	2.6	12.5	8.7
Non-Hispanic	25.4	1.8	7.9	17.5
Hispanic	15.9	4.2	18.3	-2.4
BLACK	19.5	3.7	19.5	-
INDIAN	31.0	4.4	29.8	2.0

The Hispanic comprise a portion of all the counties' populations (12%-90%). Four counties have notably high percentages of Indian population, while the counties showing a high percentage of Black population are mainly those of the southeastern corner of the State (Table 1.10).

TABLE 1.10
NEW MEXICO
RACIAL DISTRIBUTION BY COUNTY
1979

HEALTH DISTRICTS	COUNTY	WHITE		BLACK	INDIAN	OTHER
		Non-Hispanic	Hispanic			
	NEW MEXICO	51.5%	38.1%	1.9%	7.7%	.8%
1	MCKINLEY	23.3	13.7	.9	61.3	.7
	SAN JUAN	52.4	11.6	.6	35.0	.4
2	COLFAX	45.7	53.0	.5	.4	.4
	LOS ALAMOS	81.6	17.2	.4	.5	.4
	MORA	9.2	90.5	-	-	.1
	RIO ARRIBA	11.0	77.1	.2	10.9	.8
	SAN MIGUEL	16.9	81.4	.4	.4	.9
	SANTA FE	33.7	63.3	.5	2.0	.4
	TAOS	10.5	80.9	.2	6.8	1.6
3	BERNALILLO	57.0	38.2	2.1	1.9	.8
	SANDOVAL	23.6	36.8	.1	38.8	.6
	TORRANCE	46.8	52.7	-	.1	.5
	VALENCIA	34.1	49.7	.5	15.0	.7
4	CURRY	75.1	16.9	6.4	.3	1.4
	DE BACA	59.0	40.6	-	-	-
	GUADALUPE	16.8	83.0	-	-	.4
	HARDING	50.3	48.7	-	.3	-
	QUAY	62.2	35.6	1.1	.1	.8
	ROOSEVELT	82.6	15.1	.7	.6	1.0
	UNION	70.7	28.4	-	.1	.8
5	CATRON	55.7	41.9	.2	.4	.8
	GRANT	42.3	56.0	.5	.4	.8
	HIDALGO	39.7	58.8	.4	.4	.5
	LUNA	51.4	46.0	2.0	.1	.6
6	CHAVES	66.8	27.7	3.3	1.4	.9
	EDDY	67.0	30.1	2.2	.2	.5
	LEA	81.3	12.4	5.3	.4	.7
	LINCOLN	63.6	33.9	.5	1.1	.9
	OTERO	68.1	22.6	4.5	3.9	.9
7	DONA ANA	46.4	50.3	1.9	.3	1.1
	SIERRA	63.6	35.5	0.0	.2	.5
	SOCORRO	32.4	58.7	.7	7.2	1.1

Percentage distribution based upon 1979 population estimates developed by the New Mexico Tumor Registry.

The Hispanic, Black, and Indian are young populations. While only about 45% of New Mexico's non-Hispanic White population is under 25 years of age, the figure is almost 60% for the Hispanic and Black population and nearly 64% of the Indian population is under 25 years of age (Table 1.11).

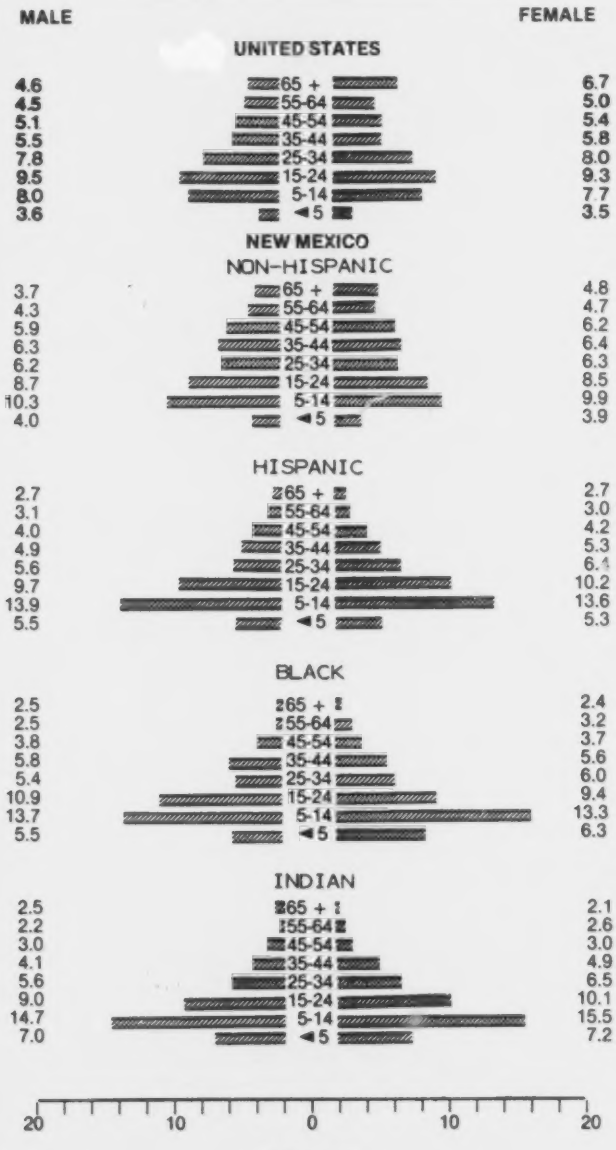
TABLE 1.11
NEW MEXICO
1979 RACE/ETHNIC POPULATIONS
Percentage Distribution by Age Group

A G E	ALL RACES	W H I T E		Black	Indian	Other
		Non-Hispanic	Hispanic			
TOTAL	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
< 5	9.0	7.9	10.8	11.8	14.2	7.3
5-14	17.5	20.2	27.5	27.0	30.2	20.0
15-24	20.8	17.2	20.0	20.3	19.1	22.0
25-34	14.8	12.6	12.0	11.4	12.1	21.6
35-44	10.9	12.7	10.0	11.4	9.1	15.2
45-54	10.0	12.0	8.2	7.5	6.0	8.5
55-64	8.3	9.0	6.0	5.7	4.8	3.1
65 +	8.8	8.5	5.4	5.0	4.5	2.3

Percentage distribution by age group for various race/ethnic groups based upon 1979 population estimates developed by the New Mexico Tumor Registry.

In the population pyramids of Figure 1.12, the shift toward a younger age among New Mexico Hispanic, Black, and Indian is graphically evident.

FIGURE 1.12
POPULATION DISTRIBUTION BY AGE
NEW MEXICO AND UNITED STATES
1979



At its present level of 1,241,000 people, New Mexico, the fifth largest state in land area, ranks 37th among the states in total population and is the seventh lowest in population density. By percentage, the Indian and Hispanic comprise larger portions of the total population in New Mexico than in any other state.

INCOME

Although monetary income is not the sole determinant of the quality of health, it is evident from various health statistics presented in reports for previous years and in other studies that low levels of income are associated with poor showings in various statistical health indicators. According to the DHEW report, *Health - United States 1978*, "Low income people in general have worse health than people with higher income."

Though New Mexico has in recent years shown improvement in such indices as personal income and number of families below poverty level, the State continues to compare poorly with other states.

New Mexico has risen in rank from 48th to 38th since 1974 in per capita personal income (Table 1.12). New Mexico's 1979 per capita personal income figure of $7560 was 14% lower than the national figure of $8773.

TABLE 1.12
PER CAPITA PERSONAL INCOME
NEW MEXICO AND UNITED STATES
1974-1979

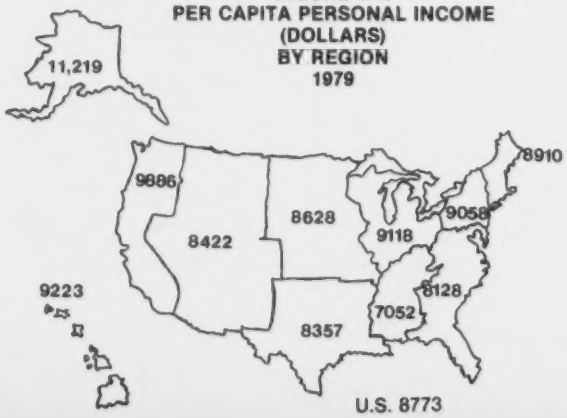
YEAR	UNITED STATES	NEW MEXICO	
		INCOME	RANK
1979	$ 8773	$ 7560	38
1978	$ 7836	$ 6574	42
1977	$ 7019	$ 5857	44
1976	$ 6441	$ 5213	45
1975	$ 5834	$ 4768	47
1974	$ 5434	$ 4137	48

Source: U.S. Dept. of Commerce

Figure 1.13 gives a general idea of the variation of per capita personal income throughout the nation. Alaska ranked highest among the states with a per capita personal income which exceeded New Mexico's by 48%. The East South Central Region was lowest of any region as Mississippi was lowest among the states with a per capita personal income of $6178—a level which New Mexico exceeded by about 22%.

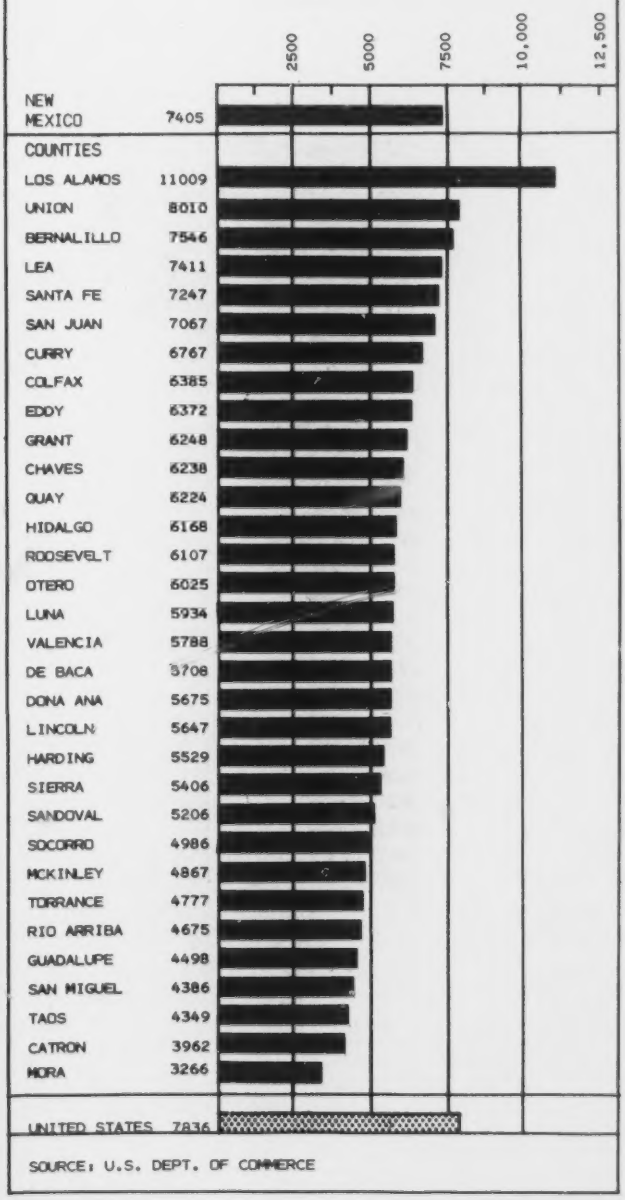
During the past decade, 1969-79, the big gainers in per capita personal income have been the energy producing states. New Mexico ranked seventh highest with a 168% increase over the ten years period; Wyoming was the biggest gainer. Still, in 1979, Nevada had the highest personal income of any Mountain state. New Mexico was next to last.

FIGURE 1.13
PER CAPITA PERSONAL INCOME
(DOLLARS)
BY REGION
1979



1978 data by county shows only two of New Mexico's counties exceeding the national figure for per capita personal income. Half the counties registered a per capita personal income figure which was less than 75% the national figure, and in Mora County the figure was less than half (42%) that of the nation as a whole (Figure 1.14).

FIGURE 1.14
PER CAPITA PERSONAL INCOME
NEW MEXICO 19
RANKING BY COUNTY



SOURCE: U.S. DEPT. OF COMMERCE

A larger percentage of persons in Mew Mexico are at or below poverty level as compared to the total United States population. According to the 1970 Census, 22.8% of the people in New Mexico are at or below poverty, as compared to 13.7% nationally. The percentage of persons in New Mexico at or below poverty is 66% greater than nationally (Table 1.13).

Table 1.13 further shows the high percentage of persons of New Mexico's various ethnic/racial populations who are at or below poverty level. Over 1/2 of the Indian and nearly 1/3 of the Spanish populations in New Mexico are at or below the poverty level, and percentage-wise these two groups comprise larger portions of the State's total population in this State than in any other state.

TABLE 1.13
PERCENTAGE OF PERSONS AT OR BELOW POVERTY LEVEL BY ETHNIC/RACE NEW MEXICO AND UNITED STATES 1970 CENSUS

ETHNIC/RACE	UNITED STATES	NEW MEXICO
TOTAL POPULATION	13.7%	22.8%
All White	10.9	20.1
Hispanic	*23.4*	*32.6*
Non-Hispanic	*NA*	*10.1*
All Other	33.6	50.1
Black	35.0	41.7
Indian	38.3	53.6

According to the 1970 census, New Mexico ranked eighth highest among the states in percentage of families below the poverty level, and was by far the highest in the western region of the United States.

Also according to the census, 31 out of 32 New Mexico counties exceeded the national rate for families below the poverty level (Figure 1.15). Mora County exceeded the national rate by a factor of more than five, In sixteen of the State's counties the percentage of families below poverty level is at least twice the national rate (Table 1.15 on the following page).

The *"Survey of Income and Education"* conducted for 1975 indicates that the percentage of families below poverty level in New Mexico has decreased from 18.5% in 1970 to 15.5% in 1975. Although this decrease looks encouraging, New Mexico's improvement has not kept pace with that of other states. In 1975, New Mexico ranked second highest among the states in percentage of families below the poverty level. *Data User News, Volume 12, No. 6. Issued June 1977, U.S. Department of Commerce, Bureau of the Census).*

The percentage of county population receiving financial and food stamp assistance (Figure 1.16) is highly reflective of the data regarding percentage of families below poverty and per capita income within the county.

FIGURE 1.15
NEW MEXICO FAMILIES BELOW POVERTY
PERCENTAGE BY COUNTY
RANKING BY COUNTY
1970 CENSUS

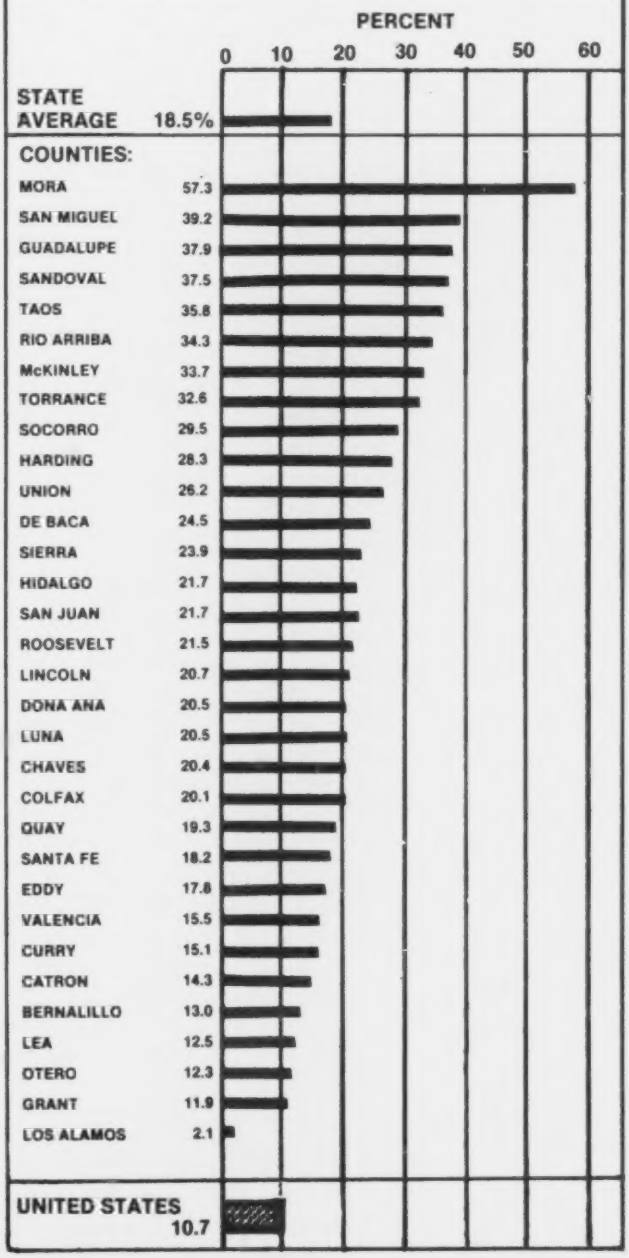
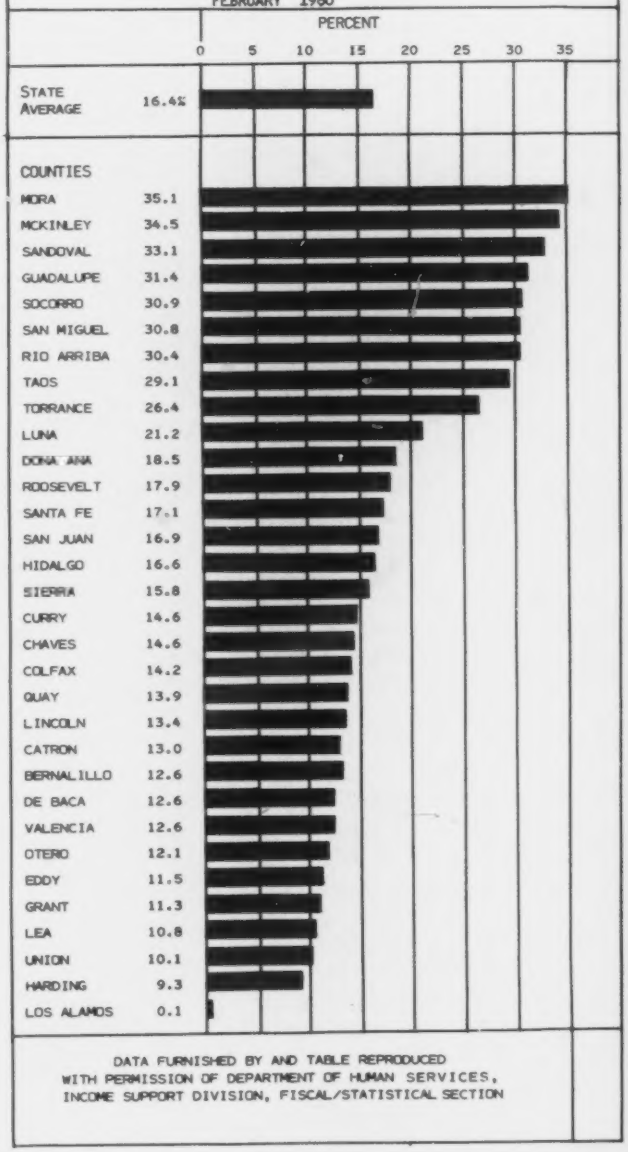


FIGURE 1.16
NEW MEXICO
FINANCIAL & FOOD STAMP RECIPIENTS
PERCENT OF COUNTY POPULATION
RANKING BY COUNTY
FEBRUARY 1980



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WITH PERMISSION OF DEPARTMENT OF HUMAN SERVICES,
INCOME SUPPORT DIVISION, FISCAL/STATISTICAL SECTION

MARRIAGES & DIVORCES

After following a decreasing trend between 1970 and 1976, now for the third year in a row, the marriage rate has increased nationally. The 1979 rate of 10.7 marriages per 1,000 population was higher than any previous annual rate since 1973, and represented 2,359,000 marriages performed in the United States that year. This figure being the largest annual number of marriages ever recorded in the United States, exceeding by about 68,000 the previous peak recorded in 1946 *(Monthly Vital Statistic Report, Vol. 28, No. 13, National Center for Health Statistics).*

The Mountain division experienced the highest marriage rate nationally (Figure 1.17), due mainly to Nevada's extremely high rate of 173.6 marriages per 1,000 population—highest in the nation. All of the other states had marriage rates between 18.4 (South Carolina) and 7.4 (Massachusetts).

FIGURE 1.17
UNITED STATES
MARRIAGE RATES*
BY REGION
1979

*PROVISIONAL RATE PER 1,000 POPULATION

1979 provisional state data indicate that the marriage rate increased in 31 states, declined in 15 states, and remained unchanged in 4 states.

New Mexico's marriage rate dropped from 13.7 in 1978 to 13.6 marriages per 1,000 population in 1979. Despite the decrease, the State's marriage rate remains 27% higher than the national rate and ranks New Mexico fifth highest among the States.

Of the State's 32 counties, 22 exceeded the national marriage rate, as the counties ranged from a high of 43.5 marriages per thousand population in Union County to a low of 2.3 in Rio Arriba County (Table 1.14).

Those counties with higher marriage rates tend to be either border counties whose high rates reflect the impact of marriages within the county to out-of-state residents or, as is the case for Santa Fe tourist attractions.

The marriage rate increased over the prior year's in twelve of the State's counties. In Bernalillo County which accounts for 31% of all marriages in the State, the rate increased by 2.3% while in Dona Ana, the county with the next highest number of marriages, the rate remained unchanged. In Santa Fe, the only other county with more than a thousand marriages, the rate decreased.

TABLE 1.14
NEW MEXICO MARRIAGES
1977, 1978, 1979
(Rates per 1,000 Population)

HEALTH DISTRICTS	COUNTY	1979 NUMBER	1979 RATE	1978 NUMBER	1978 RATE	1977 NUMBER	1977 RATE
	NEW MEXICO	16,839	13.6	16,592	13.7	16,385	13.8
1	MCKINLEY	371	6.3	367	6.6	361	6.4
1	SAN JUAN	921	11.7	912	12.2	827	11.7
2	COLFAX	299	22.8	342	26.8	354	27.7
2	LOS ALAMOS	169	9.0	152	8.5	159	9.3
2	MORA	22	4.8	23	4.9	24	5.0
2	RIO ARRIBA	66	2.3	48	1.7	83	3.0
2	SAN MIGUEL	240	10.6	212	9.4	182	8.0
2	SANTA FE	1,170	17.3	1,155	17.6	1,146	17.6
2	TAOS	314	15.7	290	15.0	315	15.9
3	BERNALILLO	5,139	13.2	4,969	12.9	4,756	12.6
3	SANDOVAL	252	10.1	220	11.4	283	11.8
3	TORRANCE	79	9.9	87	11.8	89	13.1
3	VALENCIA	649	11.5	680	12.6	673	13.1
4	CURRY	900	21.4	897	21.7	905	22.0
4	DE BACA	43	15.9	44	15.7	42	16.8
4	GUADALUPE	36	7.5	46	9.9	44	9.0
4	HARDING	6	5.5	9	7.4	7	5.8
4	QUAY	184	16.6	169	15.2	179	16.0
4	ROOSEVELT	259	15.6	245	14.9	249	15.1
4	UNION	209	43.5	207	39.8	238	48.6
5	CATRON	23	8.5	29	10.3	22	8.8
5	GRANT	306	12.3	314	12.7	302	12.3
5	HIDALGO	72	12.4	83	13.7	137	22.1
5	LUNA	233	16.1	198	13.7	218	15.1
6	CHAVES	774	15.1	718	14.3	678	13.8
6	EDDY	684	14.2	690	14.6	713	15.7
6	LEA	913	16.5	977	18.2	920	18.3
6	LINCOLN	140	13.0	149	14.0	155	15.0
6	OTERO	695	16.1	709	16.6	702	16.6
7	DONA ANA	1,427	15.8	1,343	15.8	1,309	15.6
7	SIERRA	89	10.2	93	10.4	123	14.0
7	SOCORRO	155	14.4	136	12.7	140	14.1

Data by county of occurrence. Rate per 1,000 population.

SOURCE: Leo Yates, Extension Family Specialist, Cooperative Extension Service, New Mexico State University.

National data, based on reporting states, indicate that remarriages comprise an increasing proportion of all marriages. Between 1971 and 1978, the percent of marriages involving previously married brides increased from 24 to 32 percent. The percent of marriages involving previously married grooms increased from 25 to 34 percent.

As is the case nationally, June is still the preferred month for tying the matrimonial knot in New Mexico; August and July are second and third preferences.

There were an estimated 1,170,000 divorces granted nationally during 1979, for a national divorce rate of 5.3 divorces per thousand population. Except for 1977, the annual divorce rate has increased every year since 1966. The 1979 rate was 2% higher than that for the prior year, and 2 1/2 times the rate recorded back in 1966 *(Monthly Vital Statistics Report, Vol. 28, No. 13, National Center for Health Statistics).*

New Mexico's divorce rate increased in 1979, as did the rate in 32 of the states. As the national rate increased by 1.9%, New Mexico's rate rose 1.3% from 7.9 divorces per thousand population in 1978 to 8.0 in 1979.

New Mexico's divorce rate ranked sixth among the reporting states. Nevada reported the nation's highest divorce rate (14.9) and Massachusetts ranked lowest of the reporting states (3.0).

Over 60% of the State's counties exceeded the national divorce rate during 1979, as the counties ranged from a high of 15.9 divorces per thousand population in Curry County to a low of .7 in De Baca County. Fifteen of the State's 32 counties registered increases in divorce rates for 1979 as compared with 1978.

TABLE 1.15
NEW MEXICO
DISSOLUTION OF MARRIAGE
1977, 1978, 1979

	COUNTY	1979		1978		1977	
		NUMBER	RATE	NUMBER	RATE	NUMBER	RATE
	NEW MEXICO	9,978	8.0	9,608	7.9	9,143	7.7
1	MCKINLEY	172	2.9	172	3.1	156	2.8
1	SAN JUAN	990	6.2	511	6.8	421	5.9
2	COLFAX	72	5.5	75	5.9	73	5.7
2	LOS ALAMOS	116	6.2	109	6.1	99	5.8
2	MORA	18	3.9	31	6.6	9	1.9
2	RIO ARRIBA	92	3.2	87	3.1	80	2.9
2	SAN MIGUEL	113	5.0	139	6.2	137	6.0
2	SANTA FE	369	5.5	379	5.8	345	5.3
2	TAOS	90	4.5	104	5.2	116	5.9
3	BERNALILLO	4,011	10.3	4,103	10.7	3,369	8.9
3	SANDOVAL	79	3.2	93	3.8	159	6.4
3	TORRANCE	88	11.0	27	3.7	41	6.0
3	VALENCIA	383	6.8	348	6.5	454	8.8
4	CURRY	670	15.9	436	10.6	387	9.4
4	DE BACA	2	.7	5	1.8	7	2.8
4	GUADALUPE	4	.8	7	1.5	12	2.5
4	HARDING	1	.9	2	1.7	2	1.6
4	QUAY	50	4.5	60	5.4	73	6.5
4	ROOSEVELT	117	7.0	139	8.5	104	6.3
4	UNION	33	6.9	22	3.7	20	4.1
5	CATRON	4	1.5	9	3.2	19	7.6
5	GRANT	223	9.0	209	8.4	159	6.5
5	HIDALGO	24	4.1	8	1.3	45	7.3
5	LUNA	92	6.3	80	5.5	86	6.0
6	CHAVES	406	7.9	403	8.0	790	16.0
6	EDDY	372	7.7	332	7.0	339	7.5
6	LEA	505	9.1	454	8.4	469	8.9
6	LINCOLN	84	7.8	51	4.8	50	4.9
6	OTERO	448	10.3	407	9.5	409	9.6
7	DONA ANA	665	7.4	620	7.3	524	6.2
7	SIERRA	78	9.0	68	7.6	76	8.6
7	SOCORRO	107	9.9	118	11.0	123	12.4

HEALTH DISTRICTS

Dissolution of marriage includes annulments and divorces. Date by county of occurrence. Rates per 1,000 population.

SOURCE: Leo Yates, Extension Family Specialist, Cooperative Extension Service, New Mexico State University.

Though comparable breakdowns are not available for New Mexico, based on final 1978 data for the reporting states the following characteristics are noted: the median duration of marriages ending in divorce was 6.6 years, the median age at time of decree was 32.0 years for husbands and 29.7 for wives; divorce in the nation involved an estimated 1,147,000 children under 18 years of age—1.01 children per decree. For every 1,000 children under 18 years of age, 18.1 were involved in a divorce in 1978. This rate is twice the rate reported for 1965 and almost three times the rate for 1955.

For every hundred marriages reported in the United States during 1979, 49.6 divorces were granted. In New Mexico, during 1979, for every hundred marriages, 59.3 divorces were granted. This represents an increase over the State figures for 1978 and 1977, which were 57.9 and 55.8 divorces per 100 marriages, respectively.

The trend of recent years in the State, then, has been a decreasing rate of marriage coupled with an increasing divorce rate. In both instances New Mexico's rates are higher than the national rates—a 27% higher marriage rate and 51% higher divorce rate.

TABLE 1.16
MARRIAGES AND DISSOLUTION OF MARRIAGES
Rates per 1,000 Population
NEW MEXICO AND UNITED STATES
SELECTED YEARS 1940-1979

YEAR	MARRIAGES		DISSOLUTIONS OF MARRIAGE	
	NEW MEXICO	U.S.	NEW MEXICO	U.S.
1979	13.6	10.7	8.0	5.3
1978	13.7	10.5	7.9	5.2
1977	13.8	10.1	7.7	5.0
1976	13.3	10.0	7.8	5.0
1975	13.8	10.1	7.4	4.9
1974	14.2	10.5	7.1	4.6
.				
.				
.				
1970	NA	10.6	NA	3.5
1965	NA	9.3	NA	2.5
1960	11.6	8.5	3.0	2.2
1955	28.4	9.3	2.7	2.3
1950	33.3	11.1	3.9	2.6
1945	22.6	12.2	6.3	3.8
1940	22.9	12.1	2.3	2.0

NA - NOT AVAILABLE

In comparing marriage and divorce data for New Mexico's various counties it is well for the reader to keep in mind that, though people marry anywhere they wish, divorce or annulment is almost always filed for in the county of residence.

ABORTIONS

An estimated 30 to 55 million abortions are performed worldwide each year, making abortion one of the most prevalent means of fertility control in use today. About 60% of the world's population lives in countries where abortion is permitted, 19% where it is permitted under certain circumstances (medical, judicial, eugenic), and 21% lives in countries where it is illegal without exception.

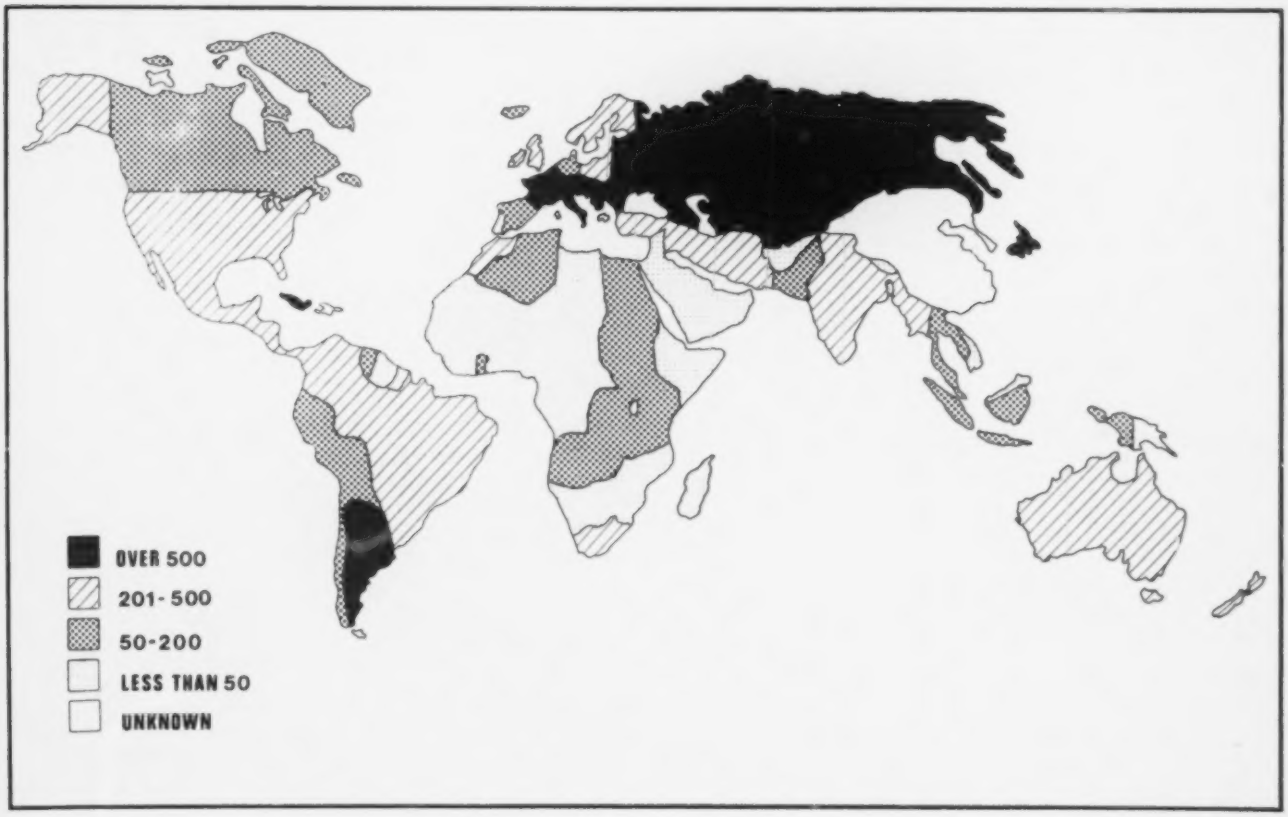
Figure 1.18 provides a general estimate of abortion (legal and illegal) around the world. One of the most striking features noted in Figure 1.18 is the high abortion ratio (number of abortions per thousand live births) for the Soviet Union. Because of the inadequacy of Soviet contraceptives, abortion is the primary form of birth control in the Soviet Union. Even the low estimate of abortions for the Soviet Union represents a lifetime average of six abortions for every woman (12 times the U.S. rate).

Latest available national data (1978) records a United States legal abortion ratio of 347 abortions per thousand live births. This number is a 7% increase over the previous year's ratio, continuing the yearly increasing trend, and representing more than 1 abortion for every 3 live births nationally during 1978. Women obtaining abortions nationally were most often young, white, unmarried, and of low parity.

New York reported the highest abortion ratio of any state, 657 abortions per thousand live births. In the District of Columbia and the City of New York, there were reported more abortions than live births. New Mexico's 1978 ratio ranked thirty-fourth highest among the states.

For 1979, 4,679 reported legal induced abortions were obtained by New Mexico resident women as compared with 4,493 in 1978. This is a 1979 ratio of 188.5 abortions per 1,000 live births.

FIGURE 1.18
ABORTIONS (LEGAL AND ILLEGAL)
PER 1,000 LIVE BIRTHS



New Mexico non-Hispanic White women accounted for 58% of abortions obtained by New Mexico resident women. The lowest abortion ratio (117.1 abortions per thousand live births), is noted for the State's Indian women, and next lowest for Hispanic White women. The 1979 abortion ratio represents a decrease from the prior year for all the State's various ethnic/racial groups except the Hispanic and Black; these experienced increases of 2% and 29% respectively.

TABLE 1.17
NEW MEXICO RESIDENTS, 1979
REPORTED LEGAL INDUCED ABORTIONS
ABORTIONS PER 1,000 LIVE BIRTHS

ETHNIC/RACE	BIRTHS	ABORTIONS	RATIO*
STATE TOTAL	24,821	4,679	188.5
WHITE	21,141	4,174	197.4
Non-Hispanic	*10,387*	*2,722*	*262.1*
Hispanic	*10,754*	*1,452*	*135.0*
BLACK	530	110	207.5
INDIAN	2,972	348	117.1
OTHER	178	47	264.0

*Abortions Per 1,000 Live Births

A ranking of the percentage of abortions reported by age groups shows the same pattern both nationally and in New Mexico. Women ages 20-24 account for the largest percentage of abortions--35% in New Mexico and 34% nationally. This age group is followed by the 15-19 year olds and then 25-29.

Nationally, 82% of abortions were obtained by women between the ages of 15-29. In New Mexico, 85% of abortions are reported in this age bracket.

TABLE 1.18
NEW MEXICO RESIDENTS
REPORTED LEGAL INDUCED ABORTIONS
NEW MEXICO 1979
UNITED STATES 1977
Percentage Distribution by Age Group

RANK	AGE GROUP	NEW MEXICO	UNITED STATES
1	20-24	34.6%	34.1%
2	15-19	29.1	29.3
3	25-29	20.9	18.5
4	30-34	9.2	9.4
5	35-39	4.2	4.7
6	$\geq$ 39	1.3	1.7
7	< 15	0.7	1.2

For all the State's various ethnic/racial populations, women 20-24 years of age comprised the largest percentage of women obtaining abortion.

The highest percentage was for the Indian women, 43%. The next highest age was 15-19, with Hispanic women showing the highest percentage, 32%. Black women recorded the largest percentage of abortions for women under 15 years of age, while for ages 35 and older, the percentages were largest for the Indian and "Other" groups.

TABLE 1.19
NEW MEXICO RESIDENTS, 1979
REPORTED LEGAL INDUCED ABORTIONS
Percentage Distribution by Age

AGE	TOTAL	WHITE			BLACK	INDIAN	OTHER
		TOTAL	NON-HISPANIC	HISPANIC			
STATE TOTAL	4679	4174	2722	1452	110	348	47
13	0.1%	0.1%	0.1%	0.1%	0.9%	0.3%	--
14	0.5	0.6	0.7	0.4	0.9	--	--
[<15]	0.6	0.7	0.8	0.5	1.8	0.3	--
15	2.1	2.1	1.9	2.3	2.7	1.7	4.3
16	3.9	3.9	4.0	3.7	8.2	2.6	2.1
17	6.5	6.6	6.1	7.6	4.5	5.5	10.6
18	8.6	8.8	8.6	9.2	7.3	7.2	6.4
19	7.8	8.0	7.3	9.1	7.3	6.9	6.4
[15-19]	28.4	29.4	27.9	31.8	30.0	25.9	29.8
20-24	34.5	33.8	32.0	37.1	36.4	42.8	31.9
25-29	20.8	21.1	22.5	18.5	21.8	16.4	21.3
30-34	9.2	9.3	10.5	7.0	6.4	9.8	4.3
35-39	4.2	4.1	4.4	3.4	3.6	5.2	8.5
> 39	1.3	1.2	1.2	1.2	--	1.7	4.3
UNKNOWN	0.4	0.4	0.4	0.4	--	--	--

As shown in Table 1.20, of New Mexico resident women obtaining abortions, 32% reported a twelfth grade education, and another 30% reported greater than a twelfth grade education.

TABLE 1.20
NEW MEXICO RESIDENTS, 1979
REPORTED LEGAL ABORTIONS BY ETHNIC/RACE
Percentage Distribution by Level of Education

ETHNIC/RACE	PERCENTAGE BY LEVEL OF EDUCATION				
	$\leq$ 8 GRADE	9-11 GRADE	12 GRADE	> 12	Unknown Not Stated
STATE TOTAL	2.0%	15.5%	31.7%	29.5%	21.3%
White	1.7	15.5	32.0	30.2	20.5
Non-Hispanic	1.0	13.8	27.2	35.8	22.2
Hispanic	3.2	18.9	41.0	19.6	17.4
Black	2.7	13.6	33.6	30.0	20.0
Indian	4.0	15.8	28.7	22.7	28.7
Other	10.6	14.9	19.1	19.1	36.2

Nationally, the majority of women (74%) obtaining abortion were unmarried at the time of abortion. The percentage was slightly higher, 76.4%, for New Mexico. The highest percentage (80%) of abortions obtained by unmarried women in the State was for Hispanic women.

TABLE 1.21
NEW MEXICO RESIDENTS, 1979
REPORTED LEGAL INDUCED ABORTIONS
PERCENTAGE BY MARITAL STATUS

ETHNIC/RACE	PERCENTAGE BY MARITAL STATUS		
	Married	*Unmarried*	*Unknown*
STATE TOTAL	23.5%	76.4%	0.1%
White	22.5	77.3	0.1
Non-Hispanic	24.0	75.9	0.1
Hispanic	19.9	80.0	0.1
Black	24.5	75.5	-
Indian	33.3	66.7	-
Other	29.8	70.2	-

Because the number of abortions has increased each year nationally, the population at risk of having more than one abortion has increased. The percentage of abortions obtained nationally by women having had one or more previous abortions rose from 13.2% in 1974 to 29.2% in 1978.

New Mexico data shows 25% of women obtaining abortion in 1979 reported having had at least one previous abortion.

The State's non-Hispanic White women reported the highest percentage of women obtaining abortion during the year who had previously obtained at least one other abortion. The percentage of second or greater abortion was lowest for Indian women (Table 1.22).

TABLE 1.22
NEW MEXICO RESIDENTS, 1979
REPORTED LEGAL ABORTIONS BY ETHNIC/RACE
By Percentage of Previous Induced Abortions

ETHNIC/RACE	PERCENTAGE BY NUMBER OF PREVIOUS INDUCED ABORTIONS				
	0	1	2	≥3	Unknown
State Total	68.3%	19.1%	4.4%	1.6%	6.7%
White:	67.3	19.7	4.4	1.6	6.9
Non-Hispanic	*64.7*	*21.5*	*5.0*	*1.9*	*6.8*
Hispanic	*72.1*	*16.3*	*3.3*	*1.1*	*7.2*
Black	77.3	16.4	2.7	0.9	2.7
Indian	76.4	13.5	4.0	1.1	4.9
Other	72.3	14.9	6.4	--	6.4

Nationally, women with one live birth had the lowest abortion ratio (201) and those with no births had the highest 446. This represents an increase in the abortion ratio for women with 2 or fewer live births and a decrease for those with 3 or more. Fifty-seven percent of abortions were obtained by women who had had no live births and 4% by women who had had 4 or more.

Fifty-four percent of New Mexico resident women, obtaining abortion in 1979, reported having no live births, and 3.6% reported having had 4 or more. The percentage having had no live births was highest for non-Hispanic White women (59%), and the percentage having had 4 or more was highest for Indian women (10%).

TABLE 1.23
NEW MEXICO RESIDENTS, 1979
REPORTED LEGAL ABORTIONS BY ETHNIC/RACE
Percentage by Number of Living Children

ETHNIC/RACE	PERCENTAGE BY NUMBER OF LIVING CHILDREN						
	0	1	2	3	4	5+	UNKNOWN NOT STATED
State Total	54.1%	19.0%	11.0%	4.1%	1.0%	1.0%	6.5%
White	55.6	19.6	10.9	3.9	1.6	1.4	6.9
Non-Hispanic	*58.5*	*17.9*	*10.4*	*3.4*	*1.2*	*1.0*	*7.6*
Hispanic	*50.3*	*22.7*	*11.9*	*4.9*	*2.3*	*2.3*	*5.6*
Black	48.2	22.7	15.5	5.5	1.8	1.8	4.5
Indian	37.9	23.0	21.3	5.2	3.7	6.3	2.6
Other	51.1	12.8	17.0	6.4	4.3	2.1	6.4

The National trend has been toward abortions at earlier gestational ages, which should have a favorable health impact by decreasing the morbidity and mortality associated with legally induced abortion procedures.

Forty-three percent of abortions obtained by New Mexico resident women were obtained before the ninth week of gestation. This figure is about 18% lower than the national figure of 52% (Table 1.24).

A greater percentage of abortions in the State occur between 11 to 15 weeks gestation than do nationally. The percentage between 9 and 10 weeks is about the same, while the percentage over 15 weeks is lower in New Mexico than nationally.

TABLE 1.24
NEW MEXICO RESIDENTS, 1979
REPORTED LEGAL INDUCED ABORTIONS
Percentage Distribution by Weeks Gestation

ETHNIC/RACE	TOTAL	PERCENTAGE DISTRIBUTION BY WEEKS GESTATION					
		< 9	9-10	11-12	13-15	16-20+	UNKNOWN
State Total	4,679	43.0%	26.5%	16.6%	7.3%	3.2%	3.5%
White	4,174	44.2	26.2	16.4	6.9	2.9	3.5
Non-Hispanic	*2,722*	*46.8*	*25.4*	*15.1*	*5.8*	*2.8*	*4.0*
Hispanic	*1,452*	*39.3*	*27.7*	*18.7*	*8.9*	*3.0*	*2.5*
Black	110	34.5	27.3	19.1	12.7	4.5	1.8
Indian	348	32.2	29.0	19.3	10.3	6.6	2.6
Other	47	36.2	29.8	8.5	6.4	4.3	14.9

Of abortions obtained during 1979 by New Mexico resident women, 98.1% were performed by M.D.s, while 1.9% were performed by D.O.s.

TABLE 1.25
NEW MEXICO RESIDENTS, 1979
REPORTED LEGAL INDUCED ABORTIONS
PERCENTAGE PERFORMED BY M.D./D.D.

ETHNIC/RACE	PERFORMED BY	
	M.D.	D.O.
STATE TOTAL	98.1%	1.9%
WHITE:	97.9	2.1
Non-Hispanic	*97.5*	*2.5*
Hispanic	*98.8*	*1.2*
BLACK	98.2	1.8
INDIAN	100.0	
OTHER	100.0	

The 1979 figures of abortions by facility in Table 1.26 represent a 34% decrease in the percentage performed in hospitals as compared to last year; a 12% decrease in the percentage performed in clinics; and a 27% increase in those performed in a doctor's office.

TABLE 1.26
NEW MEXICO RESIDENTS, 1979
REPORTED LEGAL INDUCED ABORTIONS
PERCENTAGE BY FACILITY

ETHNIC/RACE	PERCENTAGE BY FACILITY			
	Hospital	*Clinic*	*Physicians Office*	*Unknown*
STATE TOTAL	10.9%	38.6%	50.5%	-
White	9.2	37.8	53.0	-
Non-Hispanic	10.3	36.3	53.4	-
Hispanic	7.2	40.6	52.1	-
Black	15.5	49.1	35.5	-
Indian	29.0	46.0	25.0	-
Other	12.8	36.2	51.1	-

Bernalillo County resident women accounted for over half (53%) of abortions obtained by New Mexico resident women. The residents of four counties— Bernalillo, Santa Fe, San Juan, McKinley—accounted for nearly 3/4 of all resident abortions (Table 1.27)

Comparison of county abortion rations (abortion per thousand live births) shows Santa Fe County highest (452 abortions per thousand live births) and Bernalillo County second (344).

TABLE 1.27
NEW MEXICO RESIDENTS, 1979
REPORTED LEGAL INDUCED ABORTIONS
BY PLACE OF RESIDENCE
MAJOR COUNTIES/CITIES

COUNTY/CITY	TOTAL	PERCENTAGE DISTRIBUTION BY ETHNIC/RACE				
		WHITE		BLACK	INDIAN	ALL OTHER
		NON-HISPANIC	HISPANIC			
ALL COUNTIES	4,679	58.2%	31.0%	2.4%	7.4%	1.0%
BERNALILLO	2,466	59.0	32.9	3.6	3.4	1.1
Albuquerque	*2,407*	*58.8*	*33.4*	*3.7*	*3.1*	*1.1*
CHAVES	185	73.5	21.6	3.2	—	1.6
Roswell	*171*	*75.4*	*19.3*	*3.5*	—	*1.8*
DONA ANA	45	57.8	28.9	8.9	--	4.4
Las Cruces	*35*	*69.7*	*24.2*	*3.0*	--	*3.0*
EDDY	65	70.8	29.2	--	--	--
Carlsbad	*33*	*69.7*	*30.3*	--	--	--
LEA	73	78.1	9.6	6.8	--	5.5
Hobbs	*48*	*77.1*	*6.3*	*8.3*	--	*8.3*
LOS ALAMOS	69	76.8	21.7	--	--	1.4
MCKINLEY	177	27.1	15.3	1.1	55.9	0.6
RIO ARRIBA	101	26.7	56.4	—	16.8	—
SANDOVAL	98	59.2	22.4	1.0	16.3	1.0
SAN JUAN	269	52.8	11.2	—	35.3	0.7
SAN MIGUEL	90	33.3	63.3	1.1	1.1	1.1
SANTA FE	557	60.0	38.2	--	1.3	0.5
Santa Fe	*452*	*60.0*	*38.9*	--	*0.4*	*0.7*
TAOS	59	69.5	23.7	--	6.8	--
VALENCIA	152	46.7	39.5	--	13.8	--
ALL OTHER	273	72.2	24.2	1.1	1.8	0.7

Whereas Table 1.27, summarized data by county of residence, Table 1.28 are abortions by place of occurrence (where the abortion was actually performed) and comparison of the two tables illustrates the utilization of county facilities by residents of other counties. Over 76% of all abortions in the State were done in Albuquerque. Albuquerque, Santa Fe, and Roswell acounted for 97% of all abortions performed in the State.

TABLE 1.28
NEW MEXICO 1979
REPORTED LEGAL INDUCED ABORTIONS
BY PLACE OF OCCURRENCE
MAJOR COUNTIES/CITIES

COUNTY/CITY	TOTAL	PERCENTAGE DISTRIBUTION BY ETHNIC/RACE				
		WHITE		BLACK	INDIAN	OTHER
		NON-HISPANIC	HISPANIC			
ALL COUNTIES	4,983	58.6%	30.1%	2.3%	7.9%	1.0%
BERNALILLO	3,807	59.4	30.4	2.7	6.6	0.9
Albuquerque	*3,807*	*59.4*	*30.4*	*2.7*	*6.6*	*0.9*
CHAVES	318	75.8	18.6	2.8	--	2.8
Roswell	*318*	*75.8*	*18.6*	*2.8*	--	*2.8*
DONA ANA	31	58.1	25.8	9.7	--	6.5
Las Cruces	*31*	*58.1*	*25.8*	*9.7*	--	*6.5*
EDDY	8	75.0	25.0	--	--	--
Carlsbad	*8*	*75.0*	*25.0*	--	--	--
MCKINLEY	117	--	--	--	100.0	--
SANTA FE	689	56.0	38.9	0.3	4.2	0.6
Santa Fe	*689*	*56.0*	*38.9*	*0.3*	*4.2*	*0.6*
ALL OTHER	13	69.2	30.8	--	--	--

Nationally, curettage (suction and sharp) was the type of procedure used in 95% of abortions representing a continuation of the shift toward curettage from other methods present since 1972.

In New Mexico also, curettage was used in 95% of all abortions. The number of sharp curettage decreased from the previous year, but the number of suction curettage increased.

The percentage of complications reported in New Mexico was lowest for the suction curettage procedure. Overall in the State, complications were reported in about nine out of every thousand abortions (Table 1.29).

TABLE 1.29
NEW MEXICO 1979
REPORTED LEGAL INDUCED ABORTIONS
NEW MEXICO RESIDENCE AND OCCURRENCE
Percentage of Complications by Procedure

PROCEDURE	NEW MEXICO RESIDENCE		NEW MEXICO OCCURRENCE		
	Complications	Total	Complications	Complications	Total	Complications
Suction Curettage	22	4379	0.5%	23	4647	0.5%
Sharp Curettage	1	85	1.2	1	103	1.0
Intrauterine Saline Instillation	4	38	10.5	5	45	11.1
Intrauterine Prosta-Glandin Instillation	12	60	20.0	13	61	21.3
Hysterotomy	--	--	--	--	--	--
Hysterectomy	0	1	--	0	1	--
Other	2	116	1.7	2	126	1.6
Unknown/Not Stated	--	0	--	--	0	--
Total	41	4679	0.9	44	4983	0.9

In general, the percentage of complications increases with increased gestation (Table 1.30). This is consistent with national abortion mortality data which shows increasing risk with increasing weeks gestation (the relative risk is 29 times higher at 16-20 weeks gestation than at less than nine weeks.

TABLE 1.30
NEW MEXICO RESIDENTS, 1979
REPORTED LEGAL INDUCED ABORTIONS
Percentage with Reported Complications
by Gestation

GESTATION WEEKS	NUMBER		PERCENTAGE
	ABORTIONS	COMPLICATIONS	
TOTAL	4679	41	0.88%
< 9	2011	7	0.35
9-10	1238	2	0.16
11-12	775	6	0.77
13-15	340	7	2.06
16-20	149	18	12.08
21 +	1	0	--
UNKNOWN/NOT STATED	165	1	0.61

Twenty-seven women died nationally from abortion in 1978, 8 fewer than in 1977. Of these 27 deaths in 1978, eleven were after legal abortions (compared with 17 in 1977), seven were due to illegally induced abortion (compared with 4 in 1977), and nine women died from spontaneous abortions in the United States in 1978 (compared with 14 in 1977)..

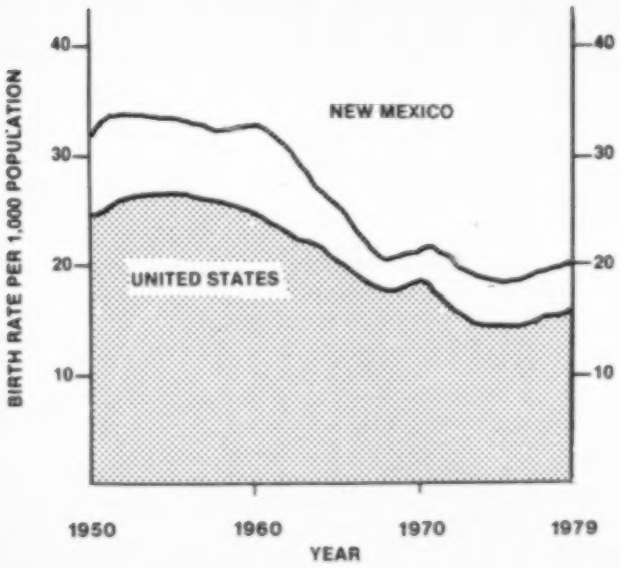
In New Mexico, no deaths have been reported from induced abortion. One death from spontaneous abortion was reported in 1974.

NATALITY

FERTILITY

Over the years New Mexico's birth rate trend has quite closely paralleled that for the United States, though the State's rate has consistently been higher than for national rate (Figure 2.1).

FIGURE 2.1
LIVE BIRTHS PER 1,000 POPULATION
NEW MEXICO RESIDENTS AND UNITED STATES
1950-1979



Between 1970 and 1975, there had been a general decreasing trend in the State's birth rate, then beginning in 1976 there has been noted a yearly increasing trend. In 1979, New Mexico's birth rate reached a figure of 20.0 births per thousand population. This represents a 1 1/2% increase over the previous year's figure, and a nine percent increase in the birth rate since 1975.

Though the 1979 national birth rate shows a seven percent increase since 1975, New Mexico's birth rate still exceeds the national figure (15.8) by 27%.

New Mexico's 1979 birth rate of 20.0 births per thousand population represents 24,821 resident births 1979. This is the highest number of resident births in the State since 1964. New Mexico's birth rate ranked fourth highest among the States. Utah ranked highest with a rate of 30.9 followed by Alaska (22.0), Idaho (21.8) and then New Mexico. Connecticut reported the lowest rate (11.9).

Generally, the New England and Middle Atlantic states recorded the lowest birth rates, nationally, in 1979.

Of the twelve states recording the highest birth rates in 1979, eleven are found in the West South Central, Mountain or Pacific divisions. Five are in the Mountain division alone. It is not surprising then that the Mountain division registered one of the higher birth rates in the nation (Figure 2.2). New Mexico's rate was third highest among the Mountain states.

FIGURE 2.2
UNITED STATES
LIVE BIRTH RATES*
BY REGION
1979

The birth rate increased in 46 states, remained constant in two, and decreased in two states according to provisional 1979 data. Of the various divisions in the nation, only the Pacific division did not experience an increased birth rate in 1979.

Of New Mexico's 32 counties, 17 showed increases in birth rate during 1979; 14 experienced decreases and in Lea County the rate remained constant (Table 2.1). The birth rate in 25 of the counties exceeded the national rate—by up to 75%.

The birth rates ranged from a high of 27.5 births per thousand population in 1979 in McKinley Country, to a low of 10.3 in Los Alamos County. Bernalillo County which accounts for 30% of the State's total births exceeded the national birth rate by 16%. The other six counties registering more than a thousand births during the year experienced birth rates exceeding the national rates by 15 to 75 percent. Rates by county for several years are listed in Table 2.1 on the following page.

TABLE 2.1
NEW MEXICO BIRTH RATE
BY COUNTY OF RESIDENCE
1972-1979

(Rates per 1,000 Population)

HEALTH DISTRICTS	COUNTY	1972	1973	1974	1975	1976	1977	1978	1979
	NEW MEXICO	19.5	19.0	19.0	18.9	19.0	19.9	19.7	20.0
1	MCKINLEY	31.6	29.7	28.3	28.9	27.7	28.5	29.0	27.5
1	SAN JUAN	23.2	24.8	22.3	23.2	24.3	25.3	25.3	26.6
2	COLFAX	18.3	18.6	18.9	15.0	15.1	17.1	16.1	16.9
2	LOS ALAMOS	10.6	11.2	10.9	10.9	11.2	10.0	11.6	10.3
2	MORA	19.8	18.2	15.1	19.1	11.9	13.3	13.6	17.0
2	RIO ARRIBA	25.2	25.5	24.2	21.8	21.9	22.7	23.5	22.3
2	SAN MIGUEL	19.1	19.9	19.0	16.7	19.6	19.0	20.3	20.9
2	SANTA FE	18.6	18.5	17.9	16.0	17.6	17.9	18.9	18.2
2	TAOS	19.7	19.9	18.5	18.3	17.9	18.7	18.2	19.9
3	BERNALILLO	17.2	17.1	16.6	15.8	16.6	17.1	17.6	18.9
3	SANDOVAL	23.0	23.5	25.1	22.9	22.7	23.5	22.6	21.8
3	TORRANCE	18.3	16.7	15.9	16.6	13.5	15.1	19.2	13.6
3	VALENCIA	20.3	18.9	19.4	19.3	22.9	23.9	24.6	23.7
4	CURRY	22.6	22.6	23.1	22.9	22.7	23.6	24.1	23.0
4	DE BACA	13.2	19.9	10.0	12.3	10.9	12.9	11.8	15.6
4	GUADALUPE	19.2	19.6	18.9	19.1	15.9	15.3	19.6	15.0
4	HARDING	10.0	7.7	9.2	6.7	13.1	8.3	13.3	13.6
4	QUAY	18.1	15.8	16.3	15.0	13.9	13.9	16.0	16.2
4	ROOSEVELT	17.8	16.0	16.0	16.6	15.5	15.0	16.8	16.9
4	UNION	16.6	19.7	15.6	10.3	19.7	15.7	19.2	15.8
5	CATRON	17.6	18.6	11.9	11.7	19.6	22.0	13.9	16.7
5	GRANT	20.9	18.9	20.9	20.1	19.9	21.0	20.6	21.9
5	HIDALGO	23.7	23.5	25.6	29.9	29.8	23.2	29.7	22.9
5	LUNA	21.0	22.9	19.9	21.0	19.9	20.3	16.0	20.5
6	CHAVES	16.6	13.7	16.7	19.0	15.1	17.8	16.9	18.0
6	EDDY	16.2	15.9	17.2	18.9	18.2	18.3	18.9	17.9
6	LEA	19.9	19.2	20.9	21.9	19.8	17.5	20.7	20.7
6	LINCOLN	18.5	13.7	19.6	15.9	15.6	17.9	19.2	15.5
6	OTERO	22.7	23.3	22.9	22.0	29.2	29.0	23.9	21.8
7	DONA ANA	20.8	20.8	20.0	19.5	19.3	19.0	18.6	18.8
7	SIERRA	11.6	11.9	11.0	10.8	11.9	12.3	8.1	11.9
7	SOCORRO	20.9	20.0	21.9	23.2	21.2	29.6	23.6	21.9

An examination of the State's birth rate by ethnicity and race shows that the increase in the New Mexico birth rate in 1979 may be attributed to an increased birth rate for the non-Hispanic White component of the population. The 8% increase in the birth rate for this group which accounts for 42% of all births in the state more than nullfied the decreased rates for the Black, Indian, and "Other" components of population which together account for less than 15% of all births. The rate for the Hispanic White remained constant between 1978 and 1979.

For the non-Hispanic White the birth rate has increased 16% since 1975; for the Hispanic White 9%; the Black have experienced a 5% decrease in birth rate, while for the Indian an 11% decrease is noted over this time period. These result in an overall increase of 9% in the State's birth rate during this period.

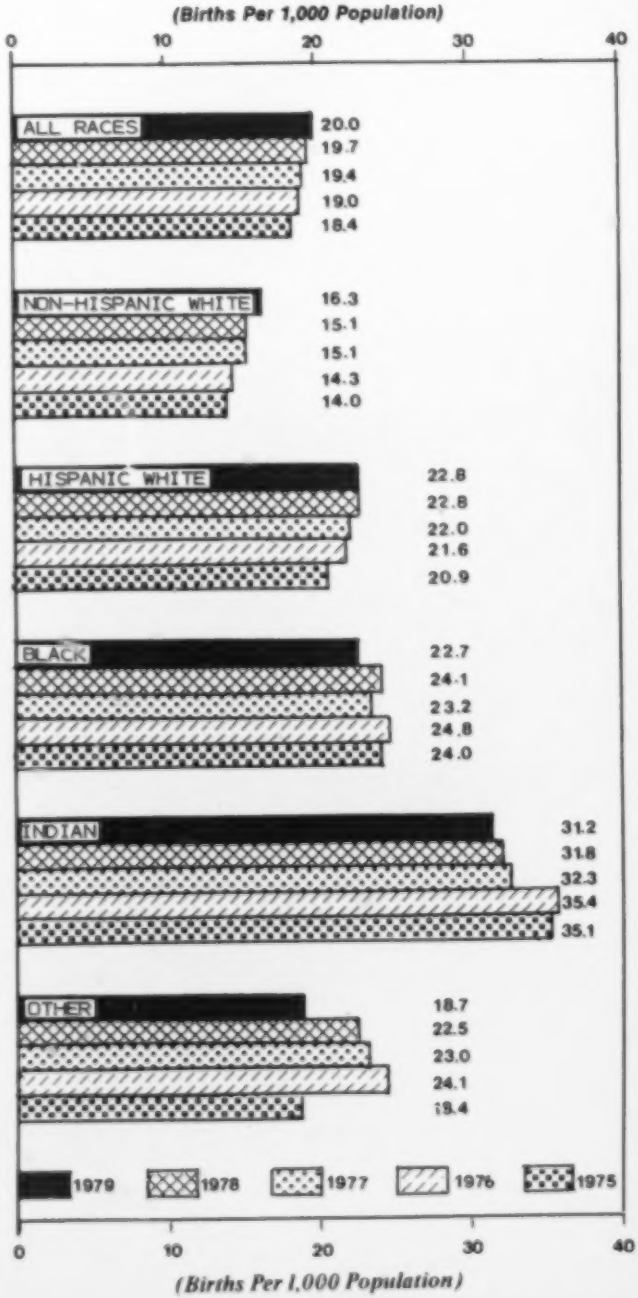
In 1979, as the overall New Mexico birth rate exceeded the national rate by 27%, the rates for each of the State's various ethnic/racial populations also exceeded national levels.

The birth rate for the non-Hispanic White exceeded the overall national rate by 3% and the national birth rate for the White by about 15% in 1979. The State's Hispanic White birth rate exceeded the national birth rate by 44% and the national birth rate for White by 61%.

The birth rate for the Black in 1979, exceeded the overall national rate by 44% and the national birth rate for Black by 5%. In spite of recent decreases, the birth rate for the State's Indian is highest in New Mexico, exceeding the State rate by 56%, the overall national rate by 97%, and national rate for "Other than White" by 41%.

FIGURE 2.3
BIRTH RATE BY ETHNIC/RACE
NEW MEXICO RESIDENTS
1975-1979

(Births Per 1,000 Population)



(Births Per 1,000 Population)

The measure of the rate of childbearing is the fertility rate. The fertility rate is the number of births per thousand women in the childbearing ages of 15-44. The purpose of using the fertility rate in comparing the fertility of two populations is to eliminate the differences created in the number of births because of differences in the percentage of women and percentage of women of childbearing age in the different populations. In other words, the fertility rate enables us to distinguish whether in a given population women are having more babies or whether there were more babies because there were a lot more women of childbearing age.

In 1960, the fertility rate in New Mexico was 156.2 births per every thousand women ages 15-44. By 1970, New Mexico women were having fewer babies—100.8 births per thousand women ages 15-44. The rate of childbearing decreased in the State during the early Seventies until reaching a low of 85.7 births per thousand women age 15-44 in 1975. Since 1976 the fertility rate has increased reaching a rate of 92.8 births per thousand women ages 15-44 in 1979.

The rate of childbearing for New Mexico women in 1979 was 36% higher than nationally.

NATALITY BY AGE OF MOTHER

The age-specific birth rates in Table 2.2 show higher rates of childbearing in New Mexico than nationally for all age groups of mothers except in the 10-14 age group.

The highest rate of childbearing, both in New Mexico and nationally, is for the 20-24 age group, followed closely by the 25-29 age group. In both cases, New Mexico's rates exceed the national rates by over 53%. For both the age groups, the State trend has been a decline in childbearing between 1960 and 1975, than an increase in rate the last part of the Seventies.

New Mexico women in age groups over 30, also show much higher childbearing rates than nationally. The increasing trend in rate in the late Seventies is noted for ages 30-39.

The rate of childbearing has declined for New Mexico women age 15-19, though the rates remain higher than nationally.

Rates of childbearing in the State have generally been lower in the late Seventies than in the early part of the Seventies. The notable exceptions are in the 25-29, 30-34, and 15-17 age groups.

TABLE 2.2
NEW MEXICO RESIDENTS
FERTILITY RATES AND BIRTH RATES
BY AGE OF MOTHER
NEW MEXICO 1960 AND 1970-1979
UNITED STATES 1978

	FERTILITY RATE a/	BIRTH RATE BY AGE OF MOTHER								
		10-14	15-17	18-19	(15-19)	20-24	25-29	30-34	35-39	40-49
UNITED STATES										
1977	67.8	1.2	34.5	81.9	53.7	115.2	114.2	57.5	19.2	2.2
1978	66.6	1.2	32.9	81.0	52.4	112.3	112.0	59.1	18.9	2.0
NEW MEXICO										
1960	156.2	.8	64.5	245.1	127.3	325.4	222.5	133.2	88.4	13.9
1970	100.8	.6	37.2	145.8	76.7	201.9	157.7	82.3	41.1	7.0
1971	99.2	.8	40.2	140.7	76.8	207.5	150.4	79.0	36.1	6.4
1972	91.1	.8	42.5	130.1	74.4	186.1	142.8	69.1	31.4	5.6
1973	88.5	.7	44.5	128.1	74.9	151.8	144.6	67.2	28.7	5.1
1974	88.7	1.0	44.7	129.5	75.5	175.6	147.9	66.4	26.0	3.9
1975	85.7	1.0	41.2	123.2	71.0	167.6	145.8	65.7	25.7	4.0
1976	88.2	1.1	45.3	124.4	73.4	169.1	154.0	70.7	23.4	3.8
1977	89.4	.8	42.6	119.2	70.5	165.5	163.7	78.1	24.6	3.1
1978	90.4	.7	41.2	124.8	71.6	167.4	163.4	80.4	24.7	3.4
1979	92.8	.8	57.0	122.3	70.1	172.2	171.8	83.7	26.1	3.1

a/ *Births per 1,000 women ages 15-44*

Rates per 1,000 women in age group.

Rates for census years based on census counts; rates for other years.
Based on population estimates furnished by the New Mexico Tumor Registry.

Of the 24,821 New Mexico resident births during 1979, the largest percentage of births were to mothers in the 20-24 age group, 35.7%. This percentage has remained unchanged over the last three years (Table 2.3). Women in their twenties accounted for 64% of all births in New Mexico during 1979.

The percentage of live births increased in 1979 as compared with 1978 for New Mexico women ages 25-29, 30-34 and 35-39. The percentage of births to teenagers 15-19 decreased.

TABLE 2.3
NEW MEXICO
RESIDENT LIVE BIRTHS
Percentage Distribution by Age of Mother
1960, 1970, 1976, 1977, 1978, 1979

AGE OF MOTHER	PERCENTAGE DISTRIBUTION OF BIRTHS BY AGE GROUP, BY YEAR					
	1960	1970	1976	1977	1978	1979
< 15	.1	.2	.4	.2	.2	.2
15-17	5.1	5.6	8.0	7.3	6.9	6.5
18-19	11.1	12.8	12.4	11.6	12.0	11.6
20-24	35.2	38.6	36.1	35.7	35.7	35.7
25-29	23.9	24.0	27.0	28.1	27.7	28.4
30-34	14.3	12.6	11.3	12.4	12.7	12.8
35-39	8.0	5.6	3.6	3.8	3.8	3.9
40-44	2.1	1.7	1.1	.8	.9	.8
45 +	.2	.1	.1	.1	.1	.1
TOTAL	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
(Actual Births)	*(30,747)*	*(22,004)*	*(22,180)*	*(23,100)*	*(23,907)*	*(24,821)*

The percentage of births to New Mexico women is higher than national percentages for all age groups except for women 25-34. The trend toward an increasing percentage of births in the 30 to 34 age group is evident both in New Mexico and nationally.

The percentage of births to women under 15 years of age remained unchanged from the previous year, nationally and in the State. The percentage is higher in New Mexico. Decreases are noted in the percentage of births to 15-17 and 18-19 year old women.

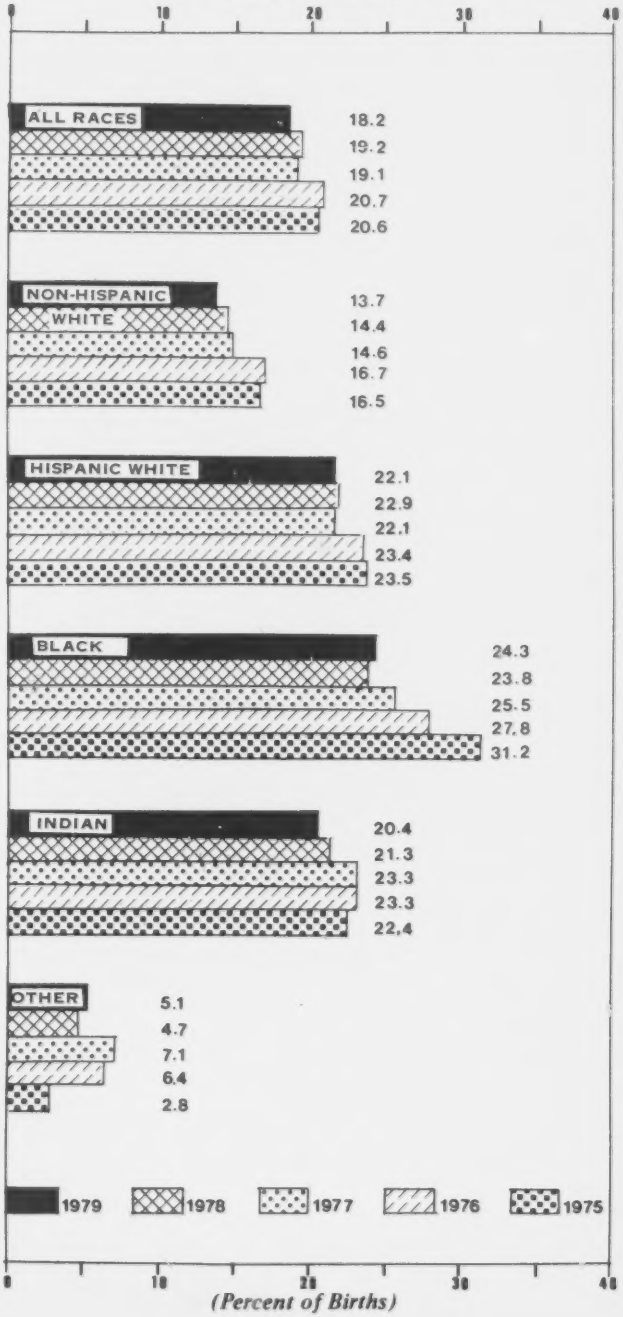
TABLE 2.4
LIVE BIRTHS
Percentage Distribution by Age of Mother
NEW MEXICO RESIDENTS 1976-79
UNITED STATES 1975-78

	PERCENTAGE DISTRIBUTION BY AGE GROUPS								
	< 15	15 - 19			20-24	25-29	30-34	35-39	40+
		Total	15-17	18-19					
NEW MEXICO									
1979	.2	18.1	6.5	11.6	35.7	28.4	12.8	3.9	.9
1978	.2	19.0	6.9	12.0	35.7	27.7	12.7	3.8	1.0
1977	.2	18.9	7.3	11.6	35.7	28.1	12.4	3.8	.9
1976	.4	20.4	8.0	12.4	36.1	27.0	11.3	3.6	1.1
UNITED STATES									
1978	.3	16.3	6.1	10.2	34.2	30.5	14.2	3.8	.7
1977	.3	16.8	6.4	10.4	34.5	30.5	13.4	3.6	.8
1976	.4	17.6	6.8	10.8	34.5	30.7	12.4	3.7	.8
1975	.4	18.5	7.2	11.3	34.8	29.8	11.9	3.7	.9

Nationally, 16.2% of all births are to teenage women. In New Mexico, the percentage of births to teenage mothers is 18.2% or about ten percent higher than nationally. The percentage of births to the State's non-Hispanic White teenagers is 17% lower than nationally. However, the percent of teenage births to the Hispanic White is 33% higher than nationally. The Black exceed the national figure by 46%; the Indian by 23% (Figure 2.4).

The trend in births to teenagers has generally been a decreasing one over the last five years. In 1979, only the Black noted an increase in the percentage over the previous year.

FIGURE 2.4
PERCENTAGE OF BIRTHS TO TEEN-AGED MOTHERS
NEW MEXICO RESIDENTS
1975-1979
(Percent of Births)



About half (50.8%) of births in the United States are to women less than 25 years of age. In New Mexico, 54% of 1979 resident births were to women less than 25 years of age. The percentages vary markedly for the State's various ethnic/racial populations. Over 67% of all births to New Mexico Black women are births to women under 25 years of age. The percentage is 60% for Hispanic White women, and 56% for Indian women. The percentage of births to non-Hispanic White women under 25 years of age is lower than nationally (48%).

The percentage of births to mothers 25-34 years of age is highest for New Mexico non-Hispanic White women and lowest for Black women. For ages 35 and older, Indian women showed the highest percentage of births (Table 2.5).

TABLE 2.5
NEW MEXICO RESIDENTS
1979 LIVE BIRTHS

Percentage Distribution by Age of Mother And Ethnic/Racial Group

ETHNIC/ RACE	TOTAL BIRTHS	PERCENTAGE DISTRIBUTION BY AGE GROUPS						
		< 15	15-19	20-24	25-29	30-34	35-39	40+
TOTAL: ALL RACES	24,821	0.2	18.1	35.7	28.4	12.8	3.9	0.9
Non-Hispanic White	10,387	0.1	13.6	34.6	33.1	14.2	3.8	0.6
Hispanic White	10,754	0.4	21.7	36.8	25.0	11.3	3.8	0.9
Black	530	0.2	24.2	42.8	21.9	7.9	1.9	1.1
Indian	2,972	0.2	20.2	35.1	24.8	13.5	4.6	1.6
Other Non-White	178	-	5.1	28.1	36.5	25.8	4.5	-

The higher than national rate of childbearing among the State's various ethnic/racial groups is evident in Table 2.6.

The fertility rate for the Indian is over two times higher than the national rate of childbearing. The number of births per thousand women ages 15-44 for New Mexico Black women is 63% higher than nationally; for Hispanic White women 56% higher than nationally, and for non-Hispanic White women 15% higher.

During 1979 the rate of childbearing decreased compared with the previous year for the State's Black and Indian women, remained constant for Hispanic women and increased for non-Hispanic White women. This 8% increase for non-Hispanic White women negated the decreases noted for Black and Indian women and resulted in an overall increase in the State's fertility rate for 1979.

Latest available national data shows a decrease in childbearing for all but women in the 30-34 age group. In New Mexico the 1979 figures indicate an increase in childbearing for women 20 to 39.

The increased childbearing for non-Hispanic White women resulting in an increased State rate in 1979 is noted for all age groups. The highest percentage increases being for non-Hispanic White women in the 25-29 and 35-39 age brackets. The increased rate of childbearing for 20-24 year old Hispanic women was nullfied by decreases in all other age groups. For Black women all but the 40-49 age group showed decreases in rate. The rate of childbearing increased for Indian women ages 30-34 and 40-49 while decreasing for all other age groups.

TABLE 2.6
NEW MEXICO RESIDENTS 1975-79
UNITED STATES 1975-1978
FERTILITY RATES AND BIRTH RATES
BY AGE OF MOTHER

U.S & N. M. By Race/Ethnic	Fertility Rate a/	Birth Rate By Age Group					
		15-19	20-24	25-29	30-34	35-39	40-49
UNITED STATES:							
1978	66.6	52.4	112.3	112.0	59.1	18.9	2.0
1977	67.8	53.7	115.2	114.2	57.5	19.2	2.2
1976	65.8	53.5	112.1	108.8	54.5	19.0	2.1
1975	66.7	56.3	114.7	110.3	53.1	19.4	2.3
NEW MEXICO:							
All Races							
1979	92.8	70.1	172.2	171.8	83.7	26.1	3.1
1978	90.4	71.6	167.4	163.4	80.4	24.7	3.4
1977	89.4	70.5	165.5	163.7	78.1	24.6	3.1
1976	88.2	73.4	169.1	154.0	70.7	23.4	3.8
1975	85.7	71.0	167.6	145.8	65.7	25.7	4.0
NON-HISPANIC White							
1979	76.6	50.5	136.5	165.3	75.6	20.7	1.4
1978	70.9	49.2	131.2	145.1	70.2	17.1	1.2
1977	71.1	49.7	132.9	147.1	68.6	15.3	1.1
1976	67.6	49.9	133.0	133.1	58.8	12.5	1.2
1975	66.7	47.8	132.6	127.6	52.8	14.5	1.3
HISPANIC White							
1979	104.1	82.3	198.0	172.1	84.3	30.0	4.5
1978	104.1	85.8	189.4	174.9	84.8	30.1	6.0
1977	100.7	80.4	183.4	174.8	80.9	30.3	5.1
1976	99.1	86.8	175.0	167.8	73.0	30.5	6.4
1975	96.0	84.4	171.4	156.4	69.9	33.0	7.0
BLACK							
1979	108.5	101.7	244.3	148.9	67.7	14.0	8.5
1978	115.3	105.1	250.0	159.3	71.7	29.7	6.9
1977	110.9	104.0	240.8	161.2	59.9	17.3	3.0
1976	120.4	125.2	265.5	127.1	84.5	29.9	5.2
1975	116.4	135.9	246.8	122.9	60.0	32.1	6.4
INDIAN							
1979	144.5	102.0	278.6	220.9	136.6	51.2	13.0
1978	147.2	107.4	283.9	224.0	130.1	53.4	12.3
1977	149.7	118.7	285.5	209.3	130.2	62.1	14.1
1976	163.1	128.5	319.9	225.8	128.0	70.4	18.0
1975	161.8	123.0	329.6	215.0	129.3	76.0	15.2

a/ *Births per 1,000 women ages 15-44*

Rates per 1,000 women in age group.

Rates based on New Mexico population estimates furnished by the New Mexico Tumor Registry.

A percentage distribution of births by age of mother by county is presented in Table A-2 of the Appendix.

Fertility rates and age-specific birth rates vary markedly by county, year, and age. These data are presented in Table A-3 of the Appendix.

LIVE BIRTH ORDER

The percentage of first live born to New Mexico women has increased substantially since the Sixties. The trend is graphically presented in Figure 2.5, and the actual percentages are presented in Table 2.7.

Between 1960 and 1979 the percentage of first live born to New Mexico women has increased by 63%, from 25% of the total to 41%. The percentage of second order live births increased by 39%. Third order live births have decreased by 17%. A 47% decrease in fourth order live births has been experienced during this period, as well as a 73% decrease in fifth and higher order live births. These shifts follow national patterns of a shift toward smaller family size.

A trend toward postponment of birth is indicated by the lower percentages of fourth and higher order births for women 20-39 years of age. For women 20-24, since 1960 the percentage of third order births has decreased 40%, fourth order has decreased 70% and fifth and great 81% with accompanying increases in first order births (50%) and second order births (14.7%)—the shift is toward first order live births. Women 25-29 account for the second highest portion of the States births, and in this group also is noted the decreased percentage for third and higher order births and increases in the percentage for first (176%) and second (82%) order births. For ages 30-39 again the percentages of first and second order births have doubled and almost even tripled since the Sixties (Table 2.7).

FIGURE 2.5
NEW MEXICO
RESIDENT LIVE BIRTHS
PERCENTAGE DISTRIBUTION BY
LIVE BIRTH ORDER
1960-1979

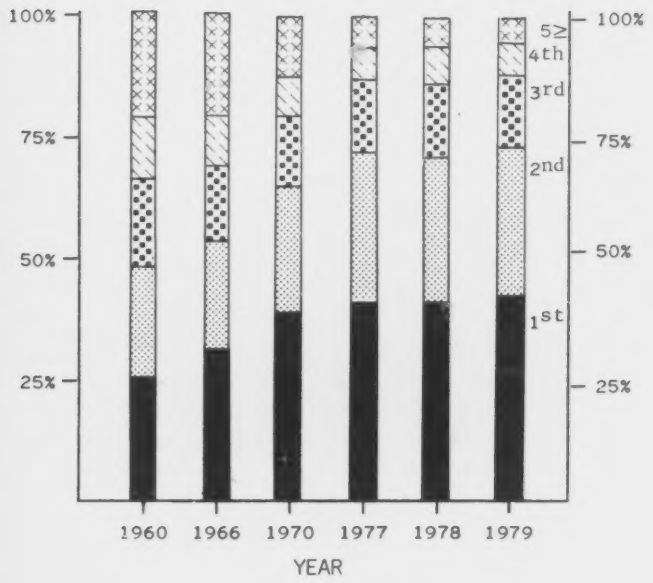


TABLE 2.7
NEW MEXICO
RESIDENT LIVE BIRTHS
PERCENTAGE DISTRIBUTION BY
LIVE BIRTH ORDER BY AGE OF MOTHER
1979, 1978, 1976, 1970, 1966, 1960

YEAR	NUMBER OF BIRTHS	Distribution by Live Birth Order				
		1	2	3	4	≥ 5
1979						
TOTAL	24,821	41.3%	31.4%	15.0%	6.5%	5.8%
< 15	57	100.0	-	-	-	-
15-19	4,484	79.2	17.6	2.7	0.5	0.1
20-24	8,869	45.2	38.1	12.7	3.1	1.0
25-29	7,048	28.2	36.5	21.6	8.9	4.8
30-34	3,185	17.0	27.8	23.7	15.6	15.9
35-39	961	10.0	16.1	19.4	16.6	37.9
40 +	217	6.5	5.1	12.9	12.4	63.1
1978						
TOTAL	23,908	41.1%	31.5%	15.0%	6.3%	6.1%
< 15	55	94.5	3.6	1.8	-	-
15-19	4,529	79.2	18.5	1.9	.3	-
20-24	8,521	46.2	37.7	12.1	2.9	1.1
25-29	6,625	25.3	37.3	23.3	8.9	5.1
30-34	3,028	15.6	28.1	24.6	15.3	16.3
35-39	903	7.5	14.8	19.0	17.6	41.0
40 +	234	6.8	4.7	5.1	9.0	74.4
1976						
TOTAL	22,180	41.8%	30.2%	14.4%	6.3%	7.3%
< 15	78	93.6	5.1	1.3	-	-
15-19	4,515	81.2	16.0	2.3	.4	.1
20-24	8,007	46.8	36.5	12.4	3.3	1.0
25-29	6,008	23.5	37.8	23.0	9.4	6.3
30-34	2,508	13.8	26.5	22.2	15.0	22.5
35-39	811	6.0	12.0	15.3	16.3	50.4
40 +	253	3.6	4.0	9.9	11.5	71.0
1970						
TOTAL	22,004	38.3%	25.8%	14.2%	8.3%	13.4%
< 15	36	96.2	3.8	-	-	-
15-19	4,026	80.9	16.5	2.4	.1	.1
20-24	8,486	45.2	35.8	12.6	4.4	2.0
25-29	5,271	18.7	28.2	24.4	14.7	14.0
30-34	2,550	7.5	15.2	20.2	18.2	38.9
35-39	1,234	4.4	7.6	11.4	15.5	61.1
40 +	401	.5	3.6	8.7	10.7	76.4
1966						
TOTAL	22,363	30.9%	22.2%	15.4%	10.7%	20.8%
< 15	31	100.0	-	-	-	-
15-19	3,997	75.7	18.8	4.5	.9	.1
20-24	7,784	37.6	32.7	17.2	8.6	3.9
25-29	5,228	13.5	23.4	23.1	16.1	23.9
30-34	3,043	4.7	10.8	17.1	18.9	48.5
35-39	1,702	4.5	6.4	9.8	12.2	67.1
40 +	578	2.0	3.4	5.1	11.2	78.3
1960						
TOTAL	30,747	25.3%	22.6%	18.1%	12.2%	21.8%
< 15	44	100.0	-	-	-	-
15-19	4,957	68.5	24.7	5.5	1.0	.3
20-24	10,833	30.2	33.2	21.0	10.2	5.4
25-29	7,362	10.2	20.1	25.1	19.1	25.5
30-34	4,386	5.6	10.6	17.4	17.3	49.1
35-39	2,459	4.5	6.0	13.0	15.3	61.1
40 +	706	4.1	6.2	10.6	5.4	73.7

TABLE 2.8
NEW MEXICO RESIDENTS 1979
UNITED STATES 1978
LIVE BIRTHS
Percentage Distribution By Live Birth Order
By Age of Mother

AGE OF MOTHER	TOTAL BIRTHS	PERCENTAGE DISTRIBUTION BY LIVE BIRTH ORDER				
		1	2	3	4	≥ 5
UNITED STATES (ALL RACES)						
Total:	XXXX	42.4%	32.2%	15.0%	5.8%	4.6%
< 15	XXXX	97.0	2.8	0.2	0.0	--
15-17	XXXX	87.7	11.1	1.0	0.1	0.0
18-19	XXXX	72.2	23.1	4.0	0.5	0.1
(15-19)	XXXX	78.0	18.7	2.9	0.4	0.1
20-24	XXXX	48.3	35.8	11.9	3.0	0.9
25-29	XXXX	32.1	37.7	19.6	7.0	3.7
30-34	XXXX	18.7	32.1	25.4	12.6	11.1
35-39	XXXX	11.4	19.3	21.5	17.0	30.7
40 +	XXXX	7.7	10.5	12.4	13.7	55.6
NEW MEXICO (ALL RACES)						
Total:	24,821	41.3%	31.4%	15.0%	6.5%	5.8%
< 15	57	100.0	--	--	--	--
15-17	1,606	90.0	9.0	0.8	0.2	--
18-19	2,878	73.1	22.3	3.8	0.6	0.1
(15-19)	4,484	79.2	17.6	2.7	0.5	0.1
20-24	8,869	45.2	38.1	12.7	3.1	1.0
25-29	7,048	28.2	36.5	21.6	8.9	4.8
30-34	3,185	17.0	27.8	23.7	15.6	15.9
35-39	961	10.0	16.1	19.4	16.6	37.9
40 +	217	6.5	5.1	12.9	12.4	63.1
NEW MEXICO (WHITE)						
Total:	21,141	42.4%	32.2%	14.7%	6.0%	4.7%
< 15	50	100.0	--	--	--	--
15-17	1,338	91.1	8.1	0.7	0.1	--
18-19	2,409	75.1	21.1	3.2	0.5	0.1
(15-19)	3,747	80.8	16.5	2.3	0.4	0.1
20-24	7,552	46.0	38.7	11.8	2.8	0.8
25-29	6,126	29.8	37.6	21.3	7.7	3.6
30-34	2,696	18.5	29.7	23.6	15.5	12.8
35-39	807	10.9	18.3	19.8	16.9	34.1
40 +	163	6.7	6.1	13.5	14.1	59.5
NEW MEXICO (BLACK)						
Total:	530	42.1%	27.5%	17.9%	5.8%	6.6%
< 15	1	100.0	--	--	--	--
15-17	52	84.6	9.6	3.8	1.9	--
18-19	76	61.8	27.6	6.6	3.9	--
(15-19)	128	71.1	20.3	5.5	3.1	--
20-24	227	42.3	29.5	18.9	4.0	4.8
25-29	116	25.0	35.3	21.6	11.2	7.8
30-34	42	14.3	23.8	38.1	9.5	14.3
35-39	10	--	20.0	30.0	10.0	40.0
40 +	6	--	--	16.7	--	83.3
NEW MEXICO (INDIAN)						
Total:	2,972	33.5%	25.9%	17.3%	10.0%	13.2%
< 15	6	100.0	--	--	--	--
15-17	213	84.5	14.6	0.9	--	--
18-19	387	63.6	28.7	6.7	0.8	0.3
(15-19)	600	71.0	23.7	4.7	0.5	0.2
20-24	1,042	39.7	34.7	18.1	5.6	1.7
25-29	739	15.7	27.7	24.1	18.5	13.9
30-34	401	6.5	13.7	23.4	18.5	38.2
35-39	136	4.4	3.7	14.7	16.2	61.0
40 +	48	6.3	2.1	10.4	8.3	72.9
NEW MEXICO (OTHER)						
Total:	178	40.4%	33.1%	14.0%	6.7%	5.6%
< 15	--	--	--	--	--	--
15-17	2	100.0	--	--	--	--
18-19	7	71.4	28.6	--	--	--
(15-19)	9	77.8	22.2	--	--	--
20-24	50	60.0	32.0	8.0	--	--
25-29	65	33.8	33.8	13.8	12.3	6.2
30-34	46	23.9	41.3	19.6	6.5	8.7
35-39	8	25.0	--	37.5	12.5	25.0
40 +	--	--	--	--	--	--

The percentages of first and second order live births to New Mexico women are slightly below corresponding national figures, and higher for fourth and higher order live births. The percentage of first live births to the State's White women is about the same as nationally, but the percentage is somewhat lower for Black and notably lower for the State's Indian (Table 2.8).

The variations by race and age are notable. For example, the percentage of Indian women 25-29 years of age giving birth to their first live born is less than half the percentage for women 25-29 nationally.

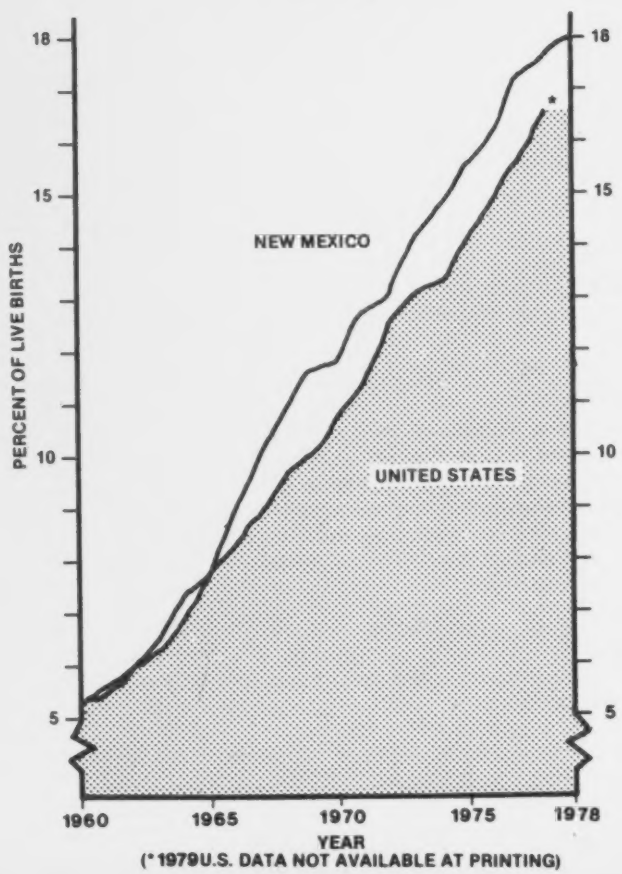
Examination of county data shows in 1979, 60% of births in Harding County were first order live births, while in Sandoval County only 32.7% were first order live births. Twenty-four of the counties exceeded the national percentage for fourth and higher order births.

A detailed breakdown of live birth order by age of mother, by county is contained in Table A-4 of the Appendix.

BIRTHS TO UNWED MOTHERS

Continuing the upward trend of the Sixties, the percentage of births to unwed mothers in New Mexico rose to 18% in 1979. As noted in Figure 2.6, the percentage of births to unwed mothers in the State has exceeded the national rate since 1965.

FIGURE 2.6
BIRTHS TO UNWED MOTHERS
PERCENTAGE OF TOTAL BIRTHS
NEW MEXICO RESIDENTS AND UNITED STATES
1960-1979



(*1979U.S. DATA NOT AVAILABLE AT PRINTING)

During 1979, the percentage of births to unwed mothers ranged from a 35.3% in McKinley County to 2.2% in Catron County (Table 2.9).

Half of the State's counties experienced increases in the percentage of births to unwed mothers in 1979 as compared with the previous year. Comparison by county of 1979 data with that for earlier periods generally reflects the overall increasing trend in the State.

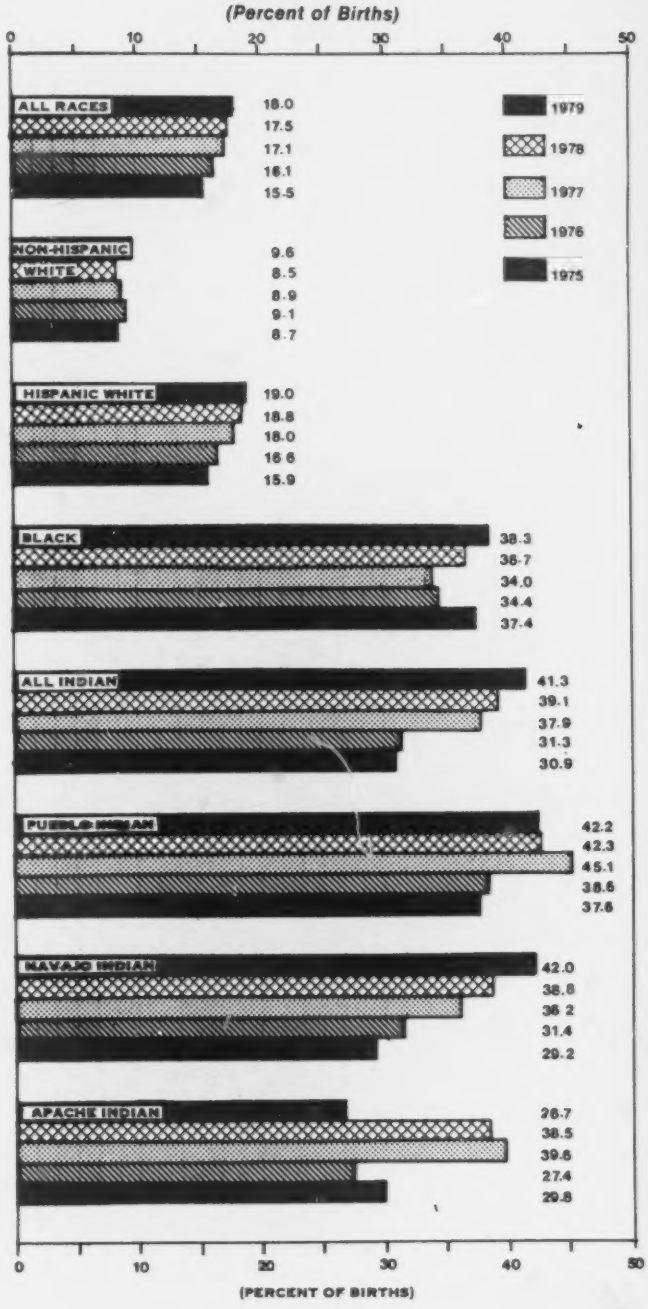
TABLE 2.9
NEW MEXICO
BIRTHS TO UNWED MOTHERS
PERCENTAGE OF TOTAL BIRTHS
BY COUNTY OF RESIDENCE

HEALTH DISTRICTS	COUNTY	1970-72	1973-75	1976	1977	1978	1979
	NEW MEXICO	12.5%	14.8%	16.1%	17.1%	17.5%	18.0%
1	MCKINLEY	22.6	26.0	26.6	28.7	34.6	35.3
1	SAN JUAN	14.3	17.4	19.1	20.1	19.8	20.5
2	COLFAX	15.0	15.5	14.4	12.2	17.5	17.6
2	LOS ALAMOS	2.1	3.7	2.2	3.6	6.2	5.2
2	MORA	16.8	25.9	26.3	25.0	10.9	16.7
2	RIO ARRIBA	14.1	18.4	15.6	19.3	22.7	20.2
2	SAN MIGUEL	18.1	19.7	21.9	26.5	25.4	23.5
2	SANTA FE	12.4	13.7	16.9	16.4	19.8	18.5
2	TAOS	18.1	19.9	19.9	20.0	20.2	16.1
3	BERNALILLO	12.4	14.9	16.1	18.0	17.4	18.5
3	SANDOVAL	25.6	29.5	30.5	30.1	29.2	29.6
3	TORRANCE	7.6	11.0	7.5	13.5	14.3	11.9
3	VALENCIA	10.4	13.5	14.7	11.6	13.6	15.5
4	CURRY	8.4	9.7	12.8	11.0	12.4	12.6
4	DE BACA	5.9	9.8	11.5	12.5	12.1	11.9
4	GUADALUPE	13.3	24.3	25.6	17.9	22.2	20.8
4	HARDING	17.1	10.0	5.9	20.0	0.0	6.7
4	QUAY	14.3	12.2	12.8	12.0	18.0	17.2
4	ROOSEVELT	6.8	8.1	13.2	15.0	13.8	10.6
4	UNION	18.3	11.5	27.8	20.0	17.6	9.2
5	CATRON	5.0	3.3	4.3	3.0	7.7	2.2
5	GRANT	9.4	9.3	11.3	12.4	16.6	14.7
5	HIDALGO	12.6	13.1	16.8	12.0	13.5	12.3
5	LUNA	12.8	12.8	17.8	12.5	13.5	14.5
6	CHAVES	13.9	14.8	17.9	17.8	17.8	17.4
6	EDDY	9.4	10.2	11.3	11.6	12.0	14.6
6	LEA	8.9	11.4	10.9	10.5	12.0	13.6
6	LINCOLN	9.3	10.1	8.9	14.9	5.3	7.8
6	OTERO	7.9	8.4	9.2	9.3	9.1	9.6
7	DONA ANA	8.5	11.8	12.5	13.5	11.4	12.5
7	SIERRA	8.7	11.0	12.0	11.9	23.6	18.2
7	SOCORRO	6.9	11.7	11.2	14.6	15.1	17.7

In 1979, the percentage of births to unwed mothers increased over the previous year for the State's White and Black women. Overall, the percentage also increased for Indian women though decreases are noted for Pueblo and Apache Indian. The percentage is highest for Indian women followed by Black women. For Hispanic women the figure is almost one out of five, and for non-Hispanic White women, one out of ten.

While other ethnic/racial groups had experienced generally increasing trends, the non-Hispanic White had experienced a decreasing trend until the 13% increase in 1979.

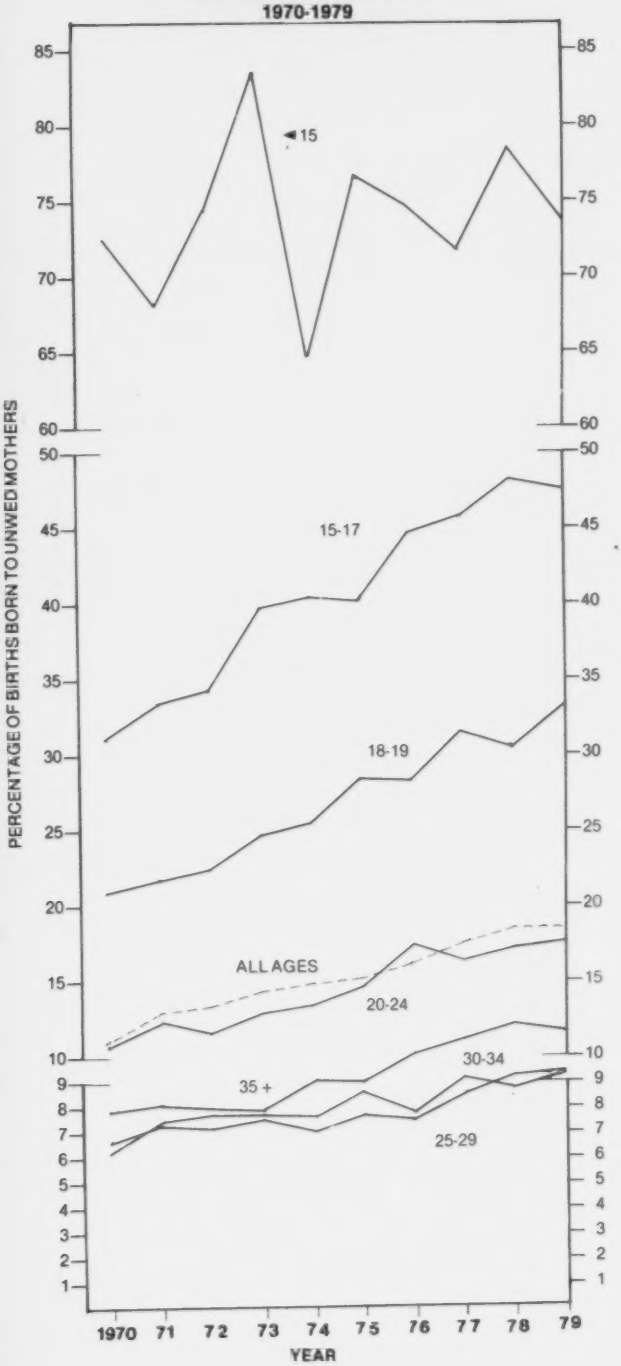
FIGURE 2.7
BIRTHS TO UNWED MOTHERS
PERCENTAGE BY ETHNIC/RACE
NEW MEXICO RESIDENTS
1975-1979



As shown in Figure 2.8, it is for women 19 and younger that the highest percentages of births to unwed mothers are noted. The percentage is lowest in 1979 for women 30-34.

The percentage of births to unwed mothers increased in 1979 over the previous year for all groups of women in the State except the less than 15, 15-17, and 35 and older.

FIGURE 2.8
BIRTHS TO UNWED MOTHERS
PERCENTAGE BY AGE GROUP, BY YEAR
NEW MEXICO RESIDENCE
1970-1979



Because there are only sixty or so births a year to New Mexico women under fifteen years of age, the percentages show marked fluctuation from year to year, yet the percentage of births to unwed mothers in this age group remains the highest of any age group (Figure 2.8).

The percentage of births to unwed mothers is lowest for the State's non-Hispanic White women in all age groups, reaching a minimum for the 25-29 age group. For Blacks, Indians, and Hispanic the 30-34 age group has the lowest percentage of births to unwed mothers.

Black women showed the highest percentage in 1979 for ages under 20 years. The percentage for the 20-24 age bracket was highest for Indian women, notably Navajo Indian. For all older ages, the percentage is highest for Indian women, either Pueblo or Navajo.

TABLE 2.10
NEW MEXICO BIRTHS TO UNWED MOTHERS 1979
Percentage By Age Of Mother And Ethnic/Race

ETHNIC/RACE	ALL AGES	PERCENTAGE BY AGE OF MOTHER						
		< 15	15-19	20-24	25-29	30-34	35-39	40 +
ALL ETHNIC/RACE	18.0%	73.7%	38.7%	17.9%	9.5%	9.4%	10.7%	16.6%
White	14.4	72.0	33.3	13.7	7.0	7.5	8.6	14.1
Non-Hispanic	9.6	60.0	28.9	9.1	4.5	4.9	5.3	9.5
Hispanic	19.0	75.0	36.0	17.8	10.2	10.6	11.6	17.0
Black	38.3	100.0	75.0	34.1	19.0	7.1	20.0	16.7
Indian	41.3	83.3	65.3	45.8	29.3	23.2	23.5	25.0
Pueblo Indian	42.2	75.0	65.0	41.9	31.6	27.4	27.5	20.0
Navajo Indian	42.0	100.0	67.8	48.7	29.5	22.2	21.5	29.0
Apache Indian	26.7	100.0	38.1	30.6	13.0	12.5	0.0	—
Other Indian	17.9	—	20.0	30.0	13.3	0.0	50.0	0.0
Other Non-White	3.4	—	25.0	4.0	1.5	2.2	0.0	—

Though overall the percentage of births to unwed mothers in New Mexico is about 23% higher than nationally, it is interesting to note that it is not among teenage women, but rather for women over 20 years of age, for whom the State's figures for births to unwed mothers are higher than nationally (Table 2.11).

The percentage of births to unwed mothers decreased from the previous year for the State's teenage women under 17 years of age, though these figures remain highest of any age group.

TABLE 2.11
BIRTHS TO UNWED MOTHERS
Percentage By Age Of Mother
NEW MEXICO RESIDENTS 1976-1979
UNITED STATES 1975-1978 ESTIMATES

	PERCENTAGE BY AGE OF MOTHER											
	< 15	15 — 19					20-24	25-29	30-34	35-39	40+
		Total	15	16	17	18	19					
NEW MEXICO												
1979	73.7	38.7	61.1	49.9	43.6	37.9	30.9	17.9	9.5	9.4	10.7	16.6
1978	78.2	37.1	63.5	52.0	42.8	33.4	28.5	16.9	9.4	8.8	11.3	12.8
1977	71.9	37.1	59.8	51.6	39.2	35.3	28.9	16.2	8.6	9.1	10.4	14.2
1976	74.4	39.8	53.7	50.9	39.3	31.0	25.7	14.8	7.6	7.7	10.0	7.5
UNITED STATES												
1978	87.3	49.1	79.1	61.9	50.9	41.0	32.2	16.9	6.9	5.6	7.5	9.6
1977	88.2	48.9	79.3	60.5	49.2	39.6	30.2	15.7	6.4	5.3	7.3	9.3
1976	86.9	40.3	71.9	58.6	46.2	36.4	27.8	13.3	5.7	5.4	7.4	8.9
1975	87.0	38.2	71.1	55.8	43.1	34.3	26.1	12.3	5.4	5.3	7.0	8.2

Percentages of births to unwed mothers by age group are presented in Table 2.12 for the State's counties. Nearly one out of two births to women 20-24 years old in McKinley County are to unwed mothers; three out of four births to Sandoval County women, 15-19 are to unwed mothers.

TABLE 2.12
NEW MEXICO BIRTHS TO UNWED MOTHERS
PERCENTAGE BY COUNTY AND AGE
1979

HEALTH DISTRICTS	COUNTY	TOTAL	PERCENTAGE BY AGE GROUP						
			< 15	15-19	20-24	25-29	30-34	35-39	40+
	NEW MEXICO	18.0%	71.9%	38.4%	18.5%	8.9%	9.4%	10.6%	18.0%
1	MCKINLEY	35.3	100.0	58.0	48.3	14.3	21.8	23.3	10.0
1	SAN JUAN	20.5	0.0	38.1	22.3	10.9	33.0	6.8	31.8
2	COLFAX	17.6	0.0	100.0	25.5	19.1	32.0	42.9	100.0
2	LOS ALAMOS	5.2	—	87.5	5.0	1.5	0.0	0.0	0.0
2	MORA	16.7	0.0	40.0	0.0	16.1	22.2	0.0	0.0
2	RIO ARRIBA	20.2	100.0	41.9	23.9	6.4	2.7	11.1	50.0
2	SAN MIGUEL	23.5	100.0	44.6	24.5	11.6	13.5	12.5	50.0
2	SANTA FE	18.5	—	45.7	23.8	7.7	6.8	9.2	5.6
2	TAOS	16.1	0.0	39.2	15.6	7.5	4.5	15.0	33.3
3	BERNALILLO	18.5	75.0	46.2	18.7	9.2	8.7	11.7	27.7
3	SANDOVAL	29.6	100.0	73.8	26.4	17.9	22.2	11.4	0.0
3	TORRANCE	11.9	—	31.6	12.2	0.0	11.8	0.0	—
3	VALENCIA	15.5	100.0	33.6	14.1	8.5	7.8	4.4	5.9
4	CURRY	12.6	100.0	26.6	10.6	4.8	8.8	12.1	0.0
4	DE BACA	11.9	0.0	30.0	11.1	6.3	0.0	0.0	—
4	GUADALUPE	20.8	100.0	40.0	16.7	7.1	0.0	0.0	—
4	HARDING	6.7	—	20.0	0.0	0.0	0.0	—	0.0
4	QUAY	17.2	0.0	40.9	10.4	10.0	9.1	0.0	0.0
4	ROOSEVELT	10.6	100.0	21.4	11.2	6.3	3.4	0.0	0.0
4	UNION	9.2	0.0	30.0	9.1	4.3	0.0	—	—
5	CATRON	2.2	—	0.0	0.0	0.0	16.7	0.0	0.0
5	GRANT	14.7	50.0	28.2	13.4	8.3	5.9	13.8	16.7
5	HIDALGO	12.3	—	18.5	13.0	6.1	13.3	—	0.0
5	LUNA	14.5	100.0	26.1	17.8	3.0	9.8	9.1	0.0
6	CHAVES	17.4	100.0	38.9	13.5	7.7	6.3	10.0	10.0
6	EDDY	14.6	60.0	24.1	16.0	5.9	8.6	8.3	40.0
6	LEA	13.6	100.0	26.9	10.5	8.0	5.2	14.3	11.1
6	LINCOLN	7.8	0.0	16.7	3.7	8.3	0.0	0.0	33.3
6	OTERO	9.6	50.0	27.5	6.4	3.9	12.0	7.7	0.0
7	DONA ANA	12.5	100.0	29.3	12.9	7.7	4.7	1.6	0.0
7	SIERRA	18.2	—	30.4	22.2	7.1	5.6	14.3	0.0
7	SOCORRO	17.7	—	33.9	14.6	10.0	7.4	20.0	25.0

— No births in this age group
0.0 No births to unwed mothers.

LOW BIRTH WEIGHT

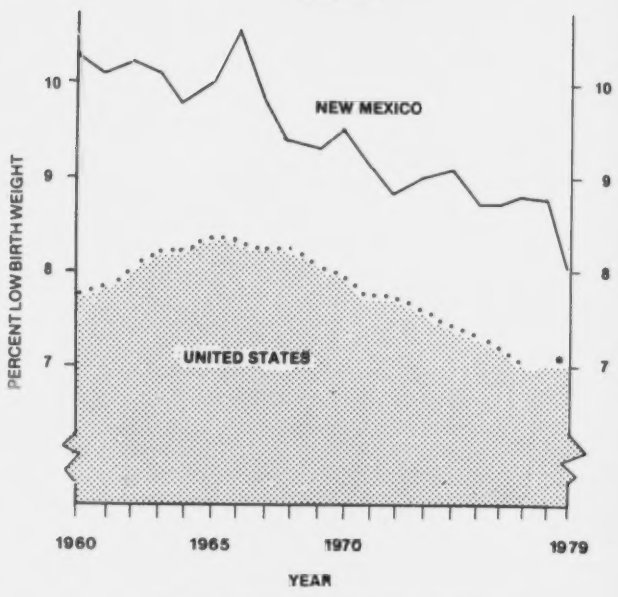
For many years the term "premature" was applied to all small newborns even though it was recognized that size at birth was an uncertain indicator of the duration of gestation. In 1961, the Expert Committee on Maternal and Child Health of the World Health Organization urged that the term "Low Birth Weight" be used only for infants weighing 2500 grams or less (5½ pounds or less) at birth, and the adjective "premature" be reserved for infants born before the 37th week of gestation.

Numerous studies indicate that birth weight is a risk factor in growth and development. The low birth weight newborn is subject to a relatively high risk of early death, along with an increased vulnerability to neurological damage.

As shown in Figure 2.9, the incidence of low birth weight babies in New Mexico has been about 22% higher than nationally though the decrease in the State figure in 1979 closed the gap to only about 14%.

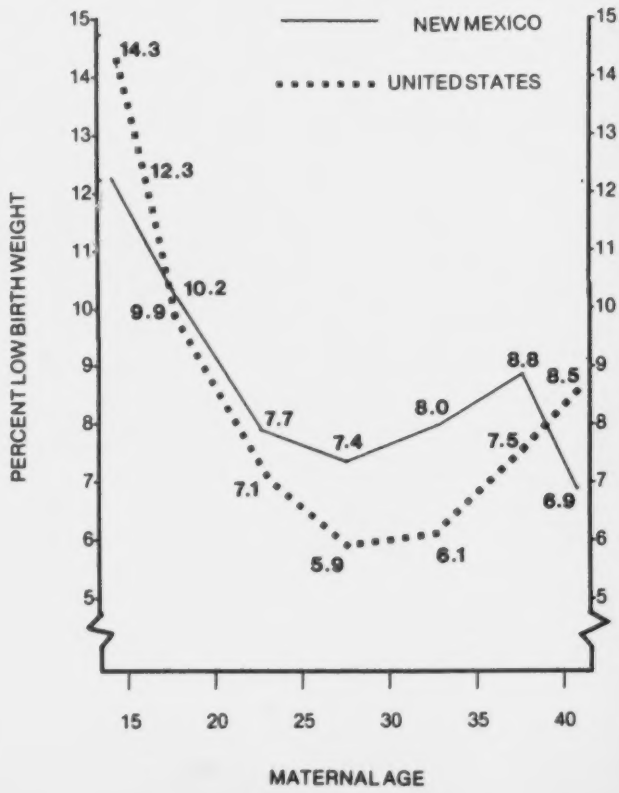
The incidence of low birth weight is lowest for mothers in the 25 to 29 age group. Higher than national rates are noted in New Mexico for women 15 to 39 years of age (Figure 2.10). The low percentage for New Mexico in the 45 and older age group most likely results from a random fluctuation because of the small numbers, as the incidence of low birth weight is known to increase with age (as seen nationally).

FIGURE 2.9
PERCENTAGE LOW BIRTH WEIGHT
NEW MEXICO RESIDENTS AND UNITED STATES
1960-1979



(*1979 U.S. DATA NOT AVAILABLE AT PRINTING)

FIGURE 2.10
LOW BIRTH WEIGHT BY MOTHER'S AGE
NEW MEXICO RESIDENTS, 1979
UNITED STATES 1978



The incidence of low birth weight by county and age of mother for 1979 is presented in Table 2.13.

TABLE 2.13
NEW MEXICO RESIDENTS
PERCENT LOW BIRTH WEIGHT BY COUNTY
(By Age Of Mother)
1979

HEALTH DISTRICTS	COUNTY	ALL AGES	PERCENTAGE LOW BIRTH WEIGHT BY AGE OF MOTHER						
			< 15	15-19	20-24	25-29	30-34	35-39	40+
	NEW MEXICO	8.1	14.0	10.9	7.9	7.3	8.1	9.0	6.9
1	MCKINLEY	7.6	0.0	9.1	6.6	7.9	5.6	11.0	15.0
	SAN JUAN	7.9	0.0	8.3	7.8	5.6	7.7	9.1	9.1
2	COLFAX	7.2	100.0	10.6	9.2	7.9	8.0	0.0	0.0
	LOS ALAMOS	7.8	-	13.3	10.0	6.2	5.9	9.5	0.0
	MORA	12.8	0.0	10.5	17.6	12.9	11.1	0.0	-
	RIO ARRIBA	10.6	0.0	13.2	9.9	9.9	12.3	11.1	0.0
	SAN MIGUEL	8.5	0.0	9.8	7.3	9.8	9.5	9.2	0.0
	SANTA FE	9.7	-	12.2	8.2	9.7	11.9	9.2	5.6
	TAOS	8.0	0.0	9.1	10.1	8.6	9.1	5.0	0.0
3	BERNALILLO	8.1	18.8	10.8	7.3	7.9	8.1	8.3	8.5
	SANDOVAL	9.2	0.0	7.5	11.0	6.6	13.3	11.9	0.0
	TORRANCE	11.9	-	5.3	19.6	18.5	5.9	0.0	-
	VALENCIA	9.6	0.0	11.7	10.6	7.9	7.8	8.9	5.9
4	CURRY	7.6	0.0	10.1	7.2	6.5	7.9	9.1	0.0
	DE BACA	0.0	0.0	0.0	0.0	0.0	0.0	0.0	-
	GUADALUPE	9.7	0.0	5.0	16.7	0.0	16.7	0.0	-
	HARDING	6.7	-	0.0	0.0	0.0	50.0	-	0.0
	QUAY	9.9	50.0	11.9	7.5	12.5	9.5	0.0	0.0
	ROOSEVELT	5.1	100.0	7.1	6.9	2.5	0.0	0.0	0.0
	UNION	10.5	-	20.0	15.2	9.3	0.0	-	-
5	CATRON	15.6	-	0.0	19.3	27.8	0.0	0.0	0.0
	GRANT	10.1	0.0	19.5	9.9	9.0	10.3	3.9	0.0
	HIDALGO	5.9	-	11.1	7.3	0.0	0.0	-	0.0
	LUNA	9.0	0.0	8.7	9.7	1.5	2.9	0.0	0.0
6	CHAVES	8.0	50.0	11.3	8.0	6.8	9.5	10.0	0.0
	EDDY	7.2	0.0	9.1	5.9	5.9	14.8	9.2	0.0
	LEA	9.3	0.0	13.8	8.9	9.0	5.2	21.9	99.9
	LINCOLN	12.6	0.0	8.3	11.1	16.7	11.1	19.3	0.0
	OTERO	6.9	0.0	9.2	6.1	6.8	7.2	7.7	0.0
7	DONA ANA	6.9	0.0	7.0	6.0	5.2	8.6	15.9	0.0
	SIERRA	9.1	-	8.7	8.3	19.3	11.1	0.0	0.0
	SOCORRO	9.3	-	11.9	8.5	10.0	3.7	20.0	0.0

- No births in that age group
0.0 No low birth weight

The incidence of low birth weight is higher for female infants than for male infants in the State, and is highest among Blacks for both male and female infants.

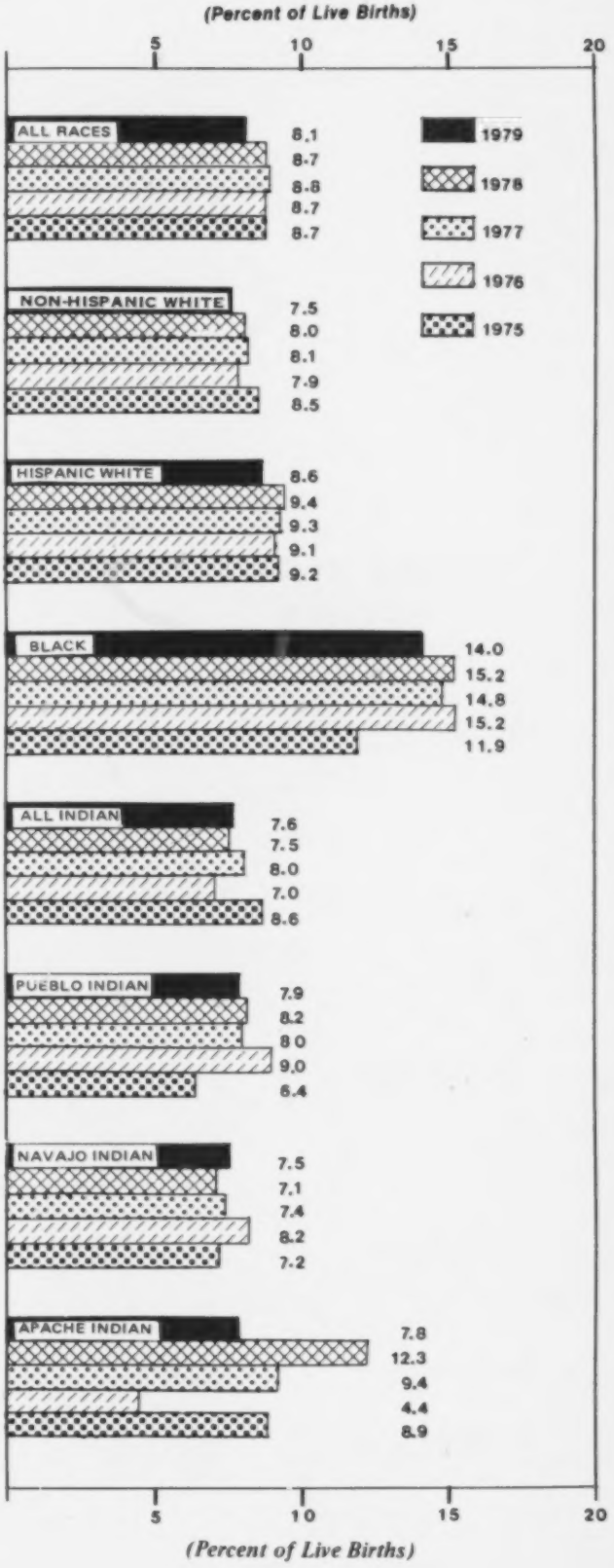
The decrease in incidence in 1979 was evident in the rates of both males and females (Table 2.14).

TABLE 2.14
NEW MEXICO RESIDENTS
Percentage Low Birth Weight
BY ETHNIC/RACE AND SEX
1979

ETHNIC/RACE	MALE		FEMALE		TOTAL	
	1978	1979	1978	1979	1978	1979
ALL RACES	7.9%	7.2%	9.5%	9.1%	8.7%	8.1%
WHITE	7.7	7.0	9.8	9.1	8.7	8.1
Non-Hispanic	7.2	6.6	8.8	8.6	8.0	7.5
Hispanic	8.2	7.5	10.6	9.7	9.4	8.6
BLACK	15.7	11.3	14.8	16.3	15.2	14.0
INDIAN	8.0	8.0	6.9	7.3	7.5	7.6
Pueblo Indian	9.1	5.9	7.3	9.6	8.2	7.8
Navajo Indian	7.8	8.8	6.3	6.2	7.1	7.5
Apache Indian	10.9	6.5	13.8	9.1	12.3	7.8
Other Indian	3.3	27.8	6.8	4.8	5.2	15.4
OTHER NON-WHITE	3.0	8.2	6.3	4.9	4.7	7.9

The decrease in the incidence of low birth weight in the State is graphically presented in Figure 2.11. After experiencing an average incidence of about 8.7% for a few years, the incidence dropped for New Mexico in 1979 by seven percent to 8.1%. The decrease was noted for all ethnic/racial groups except the Indian. The non-Hispanic White experienced the lowest incidence in the State in 1979.

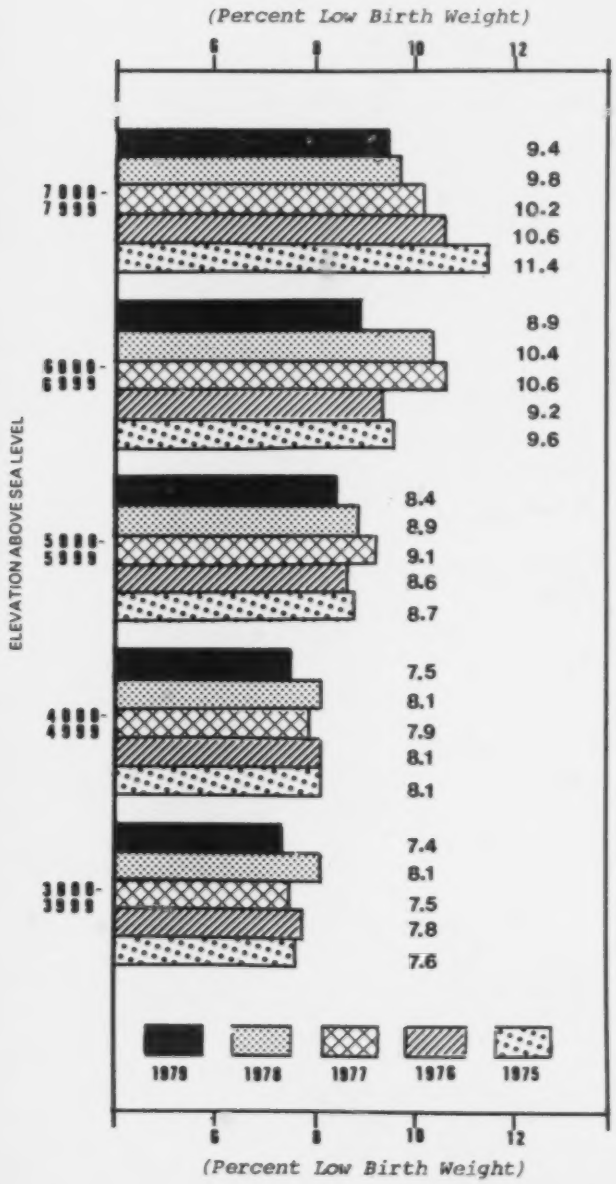
FIGURE 2.11
LOW BIRTH WEIGHT BY ETHNIC/RACE
NEW MEXICO RESIDENTS
1975-1979



State data has been tablulated yearly as to the seemingly increasing incidence of low birth weight with increasing elevation. Figure 2.12 summarizes the data for the last five years. The data presented is incidence of low birth weight for New Mexico counties grouped into five ranges of elevation. To eliminate the variation of incidence by race, the data presented is calculated for the State's White population.

The 1979 decrease is noted for all elevations, but a strikingly decreasing trend is noted for the highest elevation.

FIGURE 2.12
LOW BIRTH WEIGHT
BY ELEVATION ABOVE SEA LEVEL
WHITE POPULATION, NEW MEXICO RESIDENTS
1975-1979



MULTIPLE BIRTHS

In 1979, there were 373 live births in multiple deliveries. The majority of these multiple deliveries (97%) were twin deliveries. Five sets of triplets were delivered in the State in 1979.

The multiple birth ratio, defined as the number of live births in multiple deliveries per 1,000 total live births was 15.0 in 1979. The latest available national figure (1978) is 19.6.

HOSPITAL/ATTENDANT

Of all births reported in New Mexico during 1979, 98.5% took place in a hospital (Table 2.15). This represents a 2% increase over the 1978 figure, bringing the State percentage closer to the national level of 99%.

TABLE 2.15
NEW MEXICO
PERCENTAGE OF LIVE BIRTHS IN HOSPITAL
1956, 1966, 1977, 1978, 1979
By County of Occurrence

	COUNTY	1956	1966	1977	1978	1979
NEW MEXICO		90.3	97.1	97.1	96.7	98.5
HEALTH DISTRICTS 1	MCKINLEY	88.4	96.9	98.7	99.3	99.4
	SAN JUAN	94.2	98.4	94.4	98.9	99.1
2	COLFAX	95.0	97.2	100.0	99.4	99.0
	LOS ALAMOS	100.0	100.0	99.7	99.3	99.5
	MORA	0.0	0.0	0.0	0.0	0.0
	RIO ARRIBA	80.7	97.6	89.9	91.6	93.7
	SAN MIGUEL	60.5	77.6	89.9	91.2	96.0
	SANTA FE	91.3	99.2	95.7	95.3	95.6
	TAOS	96.7	90.8	91.3	92.1	93.3
3	BERNALILLO	96.7	99.5	98.5	97.8	98.8
	SANDOVAL	0.0	4.8	0.0	4.3	88.7
	TORRANCE	57.3	90.4	0.0	0.0	0.0
	VALENCIA	67.2	98.4	98.4	88.2	97.2
4	CURRY	94.2	95.9	99.8	90.5	99.8
	DE BACA	97.7	100.0	100.0	100.0	98.9
	GUADALUPE	58.2	97.5	100.0	-	100.0
	HARDING	0.0	0.0	0.0	-	0.0
	QUAY	99.0	95.4	96.6	96.5	98.0
	ROOSEVELT	97.2	98.6	99.7	99.4	99.3
	UNION	68.2	92.1	96.5	100.0	100.0
5	CATRON	75.0	75.0	0.0	14.3	0.0
	GRANT	97.8	99.1	99.5	99.3	98.4
	HIDALGO	89.9	100.0	37.5	0.0	0.0
	LUNA	96.9	99.4	98.6	100.0	99.7
6	CHAVES	98.8	99.7	99.8	99.6	99.3
	EDDY	96.6	98.5	99.6	99.8	99.6
	LEA	99.3	98.1	98.7	96.8	99.3
	LINCOLN	97.7	98.4	89.9	97.8	98.6
	OTERO	92.9	88.5	98.5	99.1	99.7
7	DONA ANA	81.7	97.1	97.5	97.4	98.1
	SIERRA	90.4	90.4	98.8	96.3	95.7
	SOCORRO	56.4	97.5	98.4	99.0	97.8

In examing the data by county in Table 2.15, it should be kept in mind that drastic changes in the percent of hospital births over the years in some counties, reflect the opening and closing of facilities and ensuing migration across county boundaries in facility utilization.

As seen in Table 2.16, many more births occur in certain counties than could be accounted for by resident births alone. In other counties, it is obvious that residents have gone elsewhere to give birth. In District III for example, the residents of Sandoval, Torrance and Valencia counties are giving birth outside their respective counties, and from the data one could gather that they are going mainly to Bernalillo County, where more births occur than could be accounted for by resident births alone.

TABLE 2.16
NEW MEXICO
1979 LIVE BIRTHS BY COUNTY
Births to County Residents
vs.
Births occurring in County

HEALTH DISTRICTS	COUNTY	Births to County Residents	Births Occurrence In County	% Difference Occurrence Compared to Residence
1	MCKINLEY	1,625	1,864	14.7
	SAN JUAN	2,089	2,115	1.2
2	COLFAX	221	192	- 13.1
	LOS ALAMOS	193	440	128.0
	MORA	78	1	- 98.7
	RIO ARRIBA	635	316	- 50.2
	SAN MIGUEL	460	520	13.0
	SANTA FE	1,233	1,491	20.9
	TAOS	398	298	- 25.1
3	BERNALILLO	7,170	8,512	18.6
	SANDOVAL	544	106	- 80.5
	TORRANCE	109	3	- 97.2
	VALENCIA	1,339	[illegible]	- 57.9
4	CURRY	970	892	- 8.0
	DE BACA	42	88	109.5
	GUADALUPE	72	2	- 97.2
	HARDING	15	0	-100.0
	QUAY	180	150	- 16.7
	ROOSEVELT	273	438	60.4
	UNION	76	57	- 25.0
5	CATRON	45	2	- 95.6
	GRANT	546	609	11.5
	HIDALGO	130	4	- 96.9
	LUNA	297	315	6.1
6	CHAVES	922	1,015	10.1
	EDDY	861	819	- 4.9
	LEA	1,145	809	- 29.3
	LINCOLN	167	140	- 16.2
	OTERO	944	908	- 3.8
7	DONA ANA	1,697	1,309	- 22.9
	SIERRA	99	70	- 29.3
	SOCORRO	237	186	- 21.5

A similar flow of facility utilization exists between states as well. An annual average of 1,200 New Mexico resident women give birth in other states. Approximately 66% of these occur in Texas, 17% occur in Colorado, and 14% in Arizona. On the other hand, an annual average of 780 women who are residents of other states give birth in New Mexico. Of these women about 61% are Arizona residents, 15% Texas residents, 9% Colorado residents, and 6% are Utah residents.

The end result is that about six times as many New Mexico women give birth in Texas than do Texas residents give birth in New Mexico. For Arizona and New Mexico the in-flow is to New Mexico by a factor of three, while for Colorado and New Mexico the flow is to Colorado by a factor of three.

Of all births reported in New Mexico during 1979, 93.3% were attended by a physician (Table 2.17). This is a decrease compared with the previous year, and marks the second year in a row that the percentage has dropped.

The percentage of births attended by nurse midwives increased in the State. Nurse midwives attended 5.5% of births in the State in 1979. This is the highest percentage of nurse midwife attended births recorded in New Mexico during the Seventies.

TABLE 2.17
NEW MEXICO LIVE BIRTHS
PERCENTAGE OCCURRING IN HOSPITAL
AND
BIRTHS BY ATTENDANT

(By Place of Occurrence 1965-1979)

YEAR	PERCENTAGE OF BIRTHS						
	HOSPITAL		ATTENDANT AT BIRTH				
	In	Out of	Physician	Lay Midwife	Nurse Midwife	R.N.	Other
1979	98.5%	1.5%	93.3%	.1%	5.5%	.0%	1.1%
1978	96.7	3.3	99.4	.4	4.4	.0	.8
1977	97.1	2.9	99.8	.6	3.9	.1	.7
1976	97.8	2.2	99.4	.4	4.5	.1	.6
1975	98.0	2.0	99.1	.4	4.9	.0	.6
1974	97.8	2.2	93.5	.7	5.1	.1	.6
1973	97.8	2.2	99.6	.7	4.1	.1	.6
1972	98.1	1.9	99.8	.6	4.0	.1	.5
1971	97.6	2.4	95.9	.7	2.9	.0	.6
1965	96.7	3.3	96.9	1.0	1.1	.1	.9

.0 Equals less than a tenth of a percent.

A detailed listing by county of occurrence, facility, and attendant is presented in Table A-5 of the Appendix.

A summarization of natality data characteristics for 1978, by county of residence is presented in Table 2.18 on the following page. A further breakdown of resident births by county and selected cities is presented in Table A-6 of the Appendix.

TABLE 2.18
NATALITY CHARACTERISTICS BY COUNTY, NEW MEXICO RESIDENTS
1979

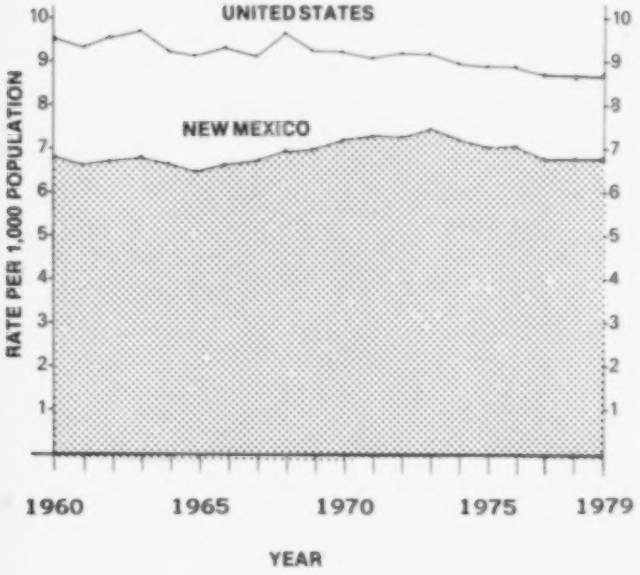
HEALTH DISTRICTS	COUNTY	LIVE BIRTHS		SEX RATIO	LOW BIRTH WEIGHT	% BIRTHS UNWED	BIRTHS TO MOTHERS ≤19	RACE OF CHILD				
								White		Non-White		
		Number	Rate (Per 1,000 Pop.)	M/F	%	MOTHERS	%	Non-Hispanic	Hispanic	Black	Indian	Other
	NEW MEXICO	24,821	20.0	1.04	8.1	18.0	18.3	10,387	10,754	530	2,972	178
1	MCKINLEY	1,625	27.5	.97	7.6	35.0	17.8	237	222	11	1,150	5
1	SAN JUAN	2,089	26.6	1.01	7.4	20.5	19.1	928	335	12	812	2
2	COLFAX	221	16.9	1.21	7.2	17.6	21.7	78	141	-	1	1
2	LOS ALAMOS	193	10.3	1.38	7.8	5.2	7.8	162	26	-	3	2
2	MORA	78	17.0	1.29	12.8	16.7	25.6	13	65	-	-	-
2	RIO ARRIBA	635	22.3	1.12	10.6	20.2	21.6	70	460	1	104	-
2	SAN MIGUEL	460	20.4	.91	8.5	23.5	20.2	63	394	1	2	-
2	SANTA FE	1,233	18.2	.97	9.7	18.5	15.2	416	762	7	46	2
2	TAOS	398	19.9	1.03	8.0	16.1	18.8	91	287	1	19	-
3	BERNALILLO	7,179	18.4	1.01	8.1	18.5	15.9	3,293	3,332	211	248	95
3	SANDOVAL	544	21.8	1.04	9.2	29.6	15.3	146	168	3	227	-
3	TORRANCE	109	13.6	.88	11.9	11.9	17.4	51	56	1	1	-
3	VALENCIA	1,339	23.7	.98	9.6	15.5	20.0	452	680	1	205	1
4	CURRY	970	23.0	1.12	7.6	12.6	19.8	622	253	82	2	11
4	DE BACA	42	15.6	1.21	0.0	11.9	26.2	29	13	-	-	-
4	GUADALUPE	72	15.0	.76	9.7	20.8	29.2	13	57	-	-	2
4	HARDING	15	13.6	2.00	6.7	6.7	33.3	5	10	-	-	-
4	QUAY	180	16.2	.86	9.4	17.2	25.6	85	88	5	2	-
4	ROOSEVELT	273	16.4	1.07	5.1	10.6	15.8	157	112	-	1	3
4	UNION	76	15.8	1.05	10.5	9.2	13.2	46	30	-	-	-
5	CATRON	45	16.7	1.25	15.6	2.2	6.7	31	13	-	1	-
5	GRANT	546	21.9	1.14	10.1	14.7	23.1	196	345	2	2	1
5	HIDALGO	130	22.4	1.20	5.4	12.3	20.8	61	68	-	-	1
5	LUNA	297	20.5	1.08	4.0	14.5	15.8	98	197	2	-	-
6	CHAVES	922	18.0	1.04	8.0	17.4	24.2	420	478	19	3	2
6	EDDY	861	17.9	1.14	7.2	14.6	22.3	470	376	14	1	-
6	LEA	1,145	20.7	1.06	9.3	13.6	24.8	697	379	62	6	1
6	LINCOLN	167	15.5	1.42	12.6	7.8	15.0	114	51	-	1	1
6	OTERO	944	21.8	1.03	6.9	9.6	16.4	583	202	60	71	28
7	DONA ANA	1,697	18.8	1.10	6.4	12.5	16.0	629	1,004	33	15	16
7	SIERRA	99	11.4	1.11	9.1	18.2	23.2	56	43	-	-	-
7	SOCORRO	237	21.9	1.01	9.3	17.7	24.9	75	107	2	49	4

MORTALITY

ALL CAUSES

The trend in crude death rates (number dying during the year expressed per 1,000 population) for New Mexico and the United States is shown in Figure 3.1. The lower death rates for New Mexico are the consequence of a younger population rather than of a more favorable mortality. As noted earlier in Figure 1.4, only 8.8% of New Mexico's population is age 65 or older, compared with 11.2% for the United States.

FIGURE 3.1
CRUDE DEATH RATE
NEW MEXICO RESIDENTS AND UNITED STATES
1960-1979



To control the effect created upon the rates by a difference in age composition, age-adjustment methods are employed to yield a death rate which would be expected if New Mexico's population had the same age structure as that of the United States.

In Table 3.1, crude death rates by sex for New Mexico and New Mexico's various ethnic and racial populations are compared with national data. The apparently lower rates for New Mexico are ~~declining~~ Deceptive. The favorable comparison caused by the State's young population structure disappears upon age-adjustment of the rates. Age-adjusted New Mexico mortality rates are significantly higher than national rates for both males and females. Examination of age-adjusted mortality rates for the State's various ethnic/racial populations show the highest male mortality in the State for Indian males, and highest female mortality for non-Hispanic White females. Mortality for Hispanics is lower than nationally for both sexes.

In comparing mortality rates in the State during the periods 1974-76 and 1977-79, overall increases in mortality are noted for both males and females. The increases result from increased mortality for non-Hispanic White males and females (Table 3.1).

TABLE 3.1
NEW MEXICO CRUDE AND ADJUSTED DEATH RATES
NEW MEXICO RESIDENTS 1977-1979 AND 1974-1976 AVERAGES
Compared with United States 1978

RATE PER 100,000 POPULATION	CRUDE DEATH RATE	1977-79 NEW MEXICO AGE ADJUSTED DEATH RATE	1974-76 NEW MEXICO AGE ADJUSTED DEATH RATE
UNITED STATES:			
Male	994.9	XXXX	XXXX
Female	778.3	XXXX	XXXX
NEW MEXICO - ALL RACES:			
Male	835.3	1068.8	1043.6
Female	538.5	870.9	829.6
NEW MEXICO NON-HISPANIC: WHITE			
Male	998.1	1158.3	1081.3
Female	710.8	931.1	820.1
NEW MEXICO HISPANIC: WHITE			
Male	626.3	872.3	883.7
Female	396.6	698.9	844.0
NEW MEXICO BLACK:			
Male	691.9	1009.1	1185.9
Female	422.5	840.0	995.0
NEW MEXICO INDIAN:			
Male	903.0	1222.1	1575.1
Female	419.9	826.2	952.9

Ethnic/racial rates based on population estimates furnished by the New Mexico Tumor Registry, University of New Mexico.

Table 3.2 compares mortality rates by age and sex for New Mexico and the United States. New Mexico's rates are generally higher though there are exceptions. The high rate for New Mexico 15-34 year old males is notable.

TABLE 3.2
AGE SPECIFIC DEATH RATES
NEW MEXICO RESIDENTS 3 YEAR AVERAGE
1977-79
AND UNITED STATES 1978

AGE GROUPS	MALE		FEMALE	
	NEW MEXICO	UNITED STATES	NEW MEXICO	UNITED STATES
1 - 4	94.5	78.2	62.6	59.9
5 - 14	35.8	41.4	22.0	26.1
15 - 24	315.9	173.5	83.4	60.9
25 - 34	406.8	192.6	124.8	79.7
35 - 44	398.3	313.8	174.8	167.8
45 - 54	740.9	797.3	397.5	433.2
55 - 64	1842.4	1906.3	937.1	976.3
65 - 74	4450.5	4185.4	2411.6	2137.6
75 - 84	8470.9	9385.3	6028.7	5863.1
85 +	20367.3	17258.9	17867.8	13541.2

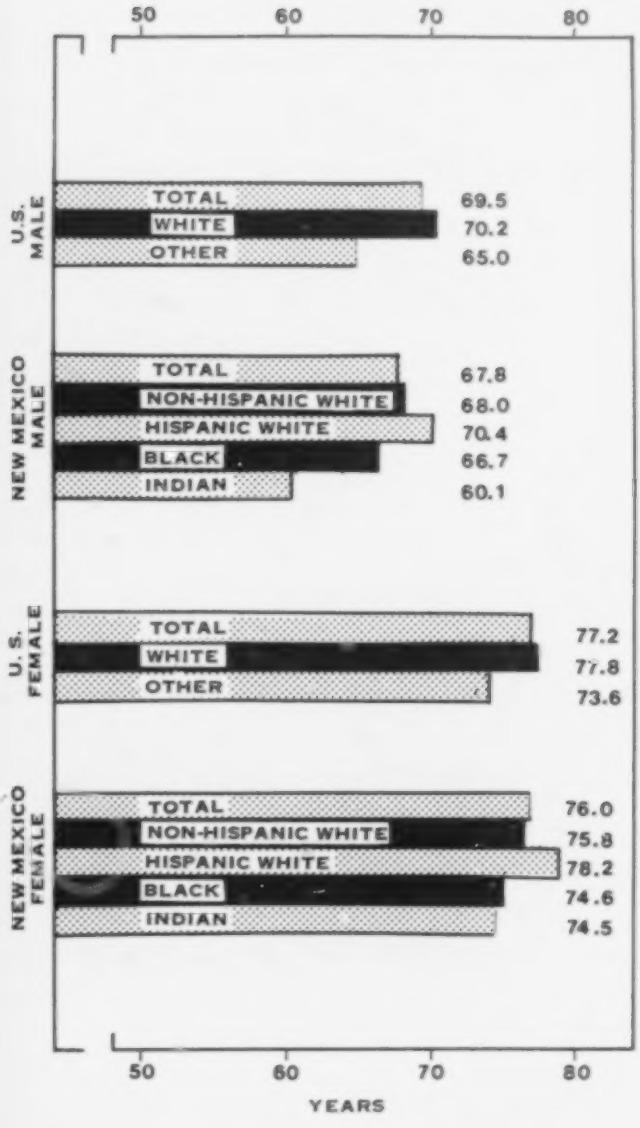
Rates Per 100,000 Population in Specified Group.

Age specific rates by county and sex are presented in Table A-7 of the Appendix.

LIFE EXPECTANCY

Further indication that New Mexico's low crude death rate is not a showing of a more favorable mortality, is that life expectancy for New Mexico males is 1.7 years less than for United States males overall, and New Mexico females life expectancy is 1.2 years less than for United States females overall (Figure 3.2).

FIGURE 3.2
EXPECTATION OF LIFE AT BIRTH
NEW MEXICO 1975-1979
UNITED STATES 1978



New Mexico life expectancy data is based on a five year (1975-79) average mortality and population estimates produced by the New Mexico Tumor Registry. Average years of remaining life by ethnic/race are presented in Table 3.3.

TABLE 3.3
AVERAGE YEARS OF LIFE REMAINING
NEW MEXICO RESIDENTS
BASED ON FIVE YEAR AVERAGE (1975-79)
MORTALITY RATES

Sex/Race	All Races	Non-Hispanic White	Hispanic White	Black	Indian
Males					
0 - 1	67.8	68.0	70.4	66.7	60.1
1 - 4	67.9	68.1	70.5	67.4	60.4
5 - 14	64.2	64.1	66.7	64.3	56.8
15 - 24	58.4	58.4	56.9	54.6	47.2
25 - 34	48.0	48.7	48.4	46.3	40.7
35 - 44	37.7	38.4	40.2	36.9	35.4
45 - 54	29.0	27.8	31.8	28.1	31.1
55 - 64	20.8	19.6	23.8	20.2	29.4
65 - 74	14.0	12.8	16.2	15.0	18.5
75 - 84	9.0	8.2	10.6	9.3	13.9
85 +	5.0	4.3	6.1	5.1	10.3
Females					
0 - 1	76.0	75.8	78.2	74.6	74.5
1 - 4	76.1	75.9	78.3	74.7	74.6
5 - 14	72.2	71.7	74.5	70.9	71.0
15 - 24	62.4	61.9	64.7	61.0	61.3
25 - 34	52.9	52.4	55.1	51.5	52.4
35 - 44	43.6	43.0	45.6	42.0	44.0
45 - 54	34.3	33.6	36.1	33.1	35.8
55 - 64	25.5	24.9	27.1	25.1	28.2
65 - 74	17.4	17.0	18.7	17.5	20.3
75 - 84	10.7	10.3	12.1	12.0	14.7
85 +	5.6	5.4	7.2	8.5	9.5

LEADING CAUSES OF DEATH

The leading causes of death in 1979 for New Mexico and the United States are ranked in Table 3.4.

TABLE 3.4
NEW MEXICO RESIDENTS 1979
UNITED STATES 1979
DEATH RATES FROM LEADING CAUSES

NEW MEXICO				UNITED STATES		
CRUDE DEATH RATE*	PERCENT OF TOTAL DEATHS	RANK	CAUSE OF DEATH	CRUDE DEATH RATE*	PERCENT OF TOTAL DEATHS	RANK
699.4	100.0	XXX	ALL CAUSES	866.2	100.0	XXX
160.4	23.1	1	Diseases of Heart	331.3	38.3	1
133.4	19.2	2	Malignant Neoplasms	183.5	21.2	2
45.9	6.6	4	Stroke	76.9	8.9	3
77.7	11.2	3	Accidents	47.9	5.5	4
30.1	4.3	5	Chronic Obstructive Pulmonary Diseases and Allied Conditions	22.7	2.6	5
18.9	2.7	7	Influenza & Pneumonia	20.0	2.3	6
15.7	2.3	9	Diabetes Mellitus	15.0	1.7	7
13.2	1.9	11	Chronic Liver Disease and Cirrhosis	13.6	1.6	8
10.0	1.4	13	Arteriosclerosis	13.0	1.5	9
19.6	2.8	6	Suicide	12.6	1.5	10
14.3	2.1	10	Homicide	10.5	1.2	11
16.0	2.3	8	Certain Conditions Originating in the Preinatal Period	10.4	1.2	12
13.1	1.9	12	Alcoholism **	2.5	0.3	XXX

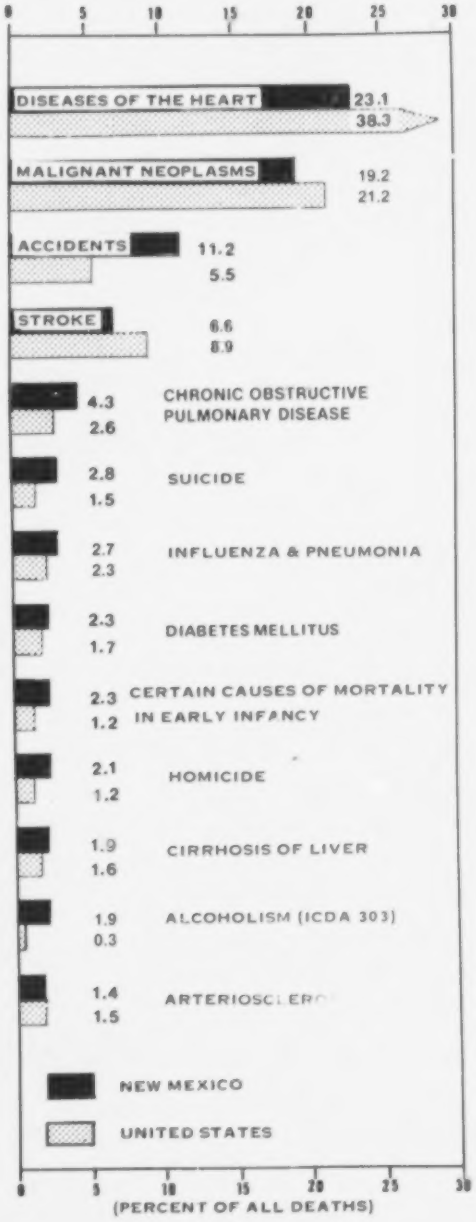
* *Rate Per 100,000 Population*

** *Includes only deaths coded 303, "Alcohol dependence syndrome," according to the Ninth Revision International Classification of Diseases. Deaths due to alcoholic cirrhosis are included "Chronic disease and cirrhosis." U.S. figure for this category based on 1978 data.*

A detailed listing of causes of death in New Mexico is found in Table A of the Appendix. The percentage of deaths for the leading causes are displayed graphically in Figure 3.3.

FIGURE 3.3
LEADING CAUSES OF DEATH
NEW MEXICO RESIDENTS 1979
UNITED STATES 1979

(PERCENT OF ALL DEATHS)



Diseases of the heart and malignant neoplasms rank one and two for both New Mexico and the United States, although these two causes account for lower percentages of deaths in New Mexico than nationally.

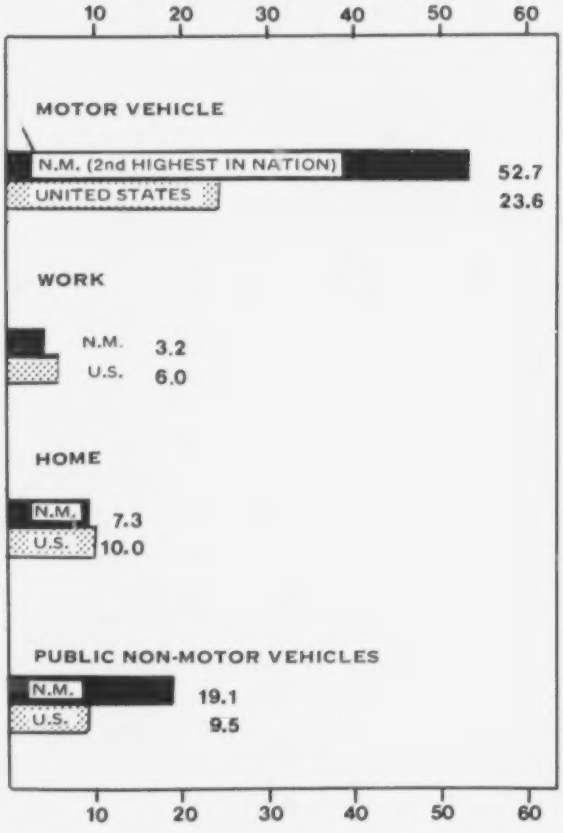
Nationally, stroke ranks as the third major cause of death, but in New Mexico, accidents rank third, accounting for about twice the percentage of deaths than for the nation as a whole.

New Mexico's fatality rate for accidental deaths ranks third highest among the states, and is second highest in motor vehicle accident fatalities per 100,000 population. If, however, the motor vehicle fatality rate is taken with regard to the number of deaths per vehicle miles or the number of deaths per number of registered motor vehicles, then New Mexico ranks first among the states.

FIGURE 3.4
PRINCIPAL CLASSES OF ACCIDENTAL DEATHS
NEW MEXICO AND UNITED STATES

1979

(DEATH RATE PER 100,000 POPULATION)



SOURCE: Accident Facts 1979 Edition
National Safety Council

Suicide, homicide and alcoholism also rank higher among the leading causes of death in New Mexico than in the United States, and account for much higher percentages of deaths.

As noted in Table 3.5, several causes of death increased in rate over the previous year. The notable increase in the suicide rate coupled with a decreased rate for influenza/pneumonia served to rank suicide as the fifth leading cause of death in the State in 1979.

TABLE 3.5
NEW MEXICO RESIDENTS
DEATH RATES FROM LEADING CAUSES
DATA FROM 1974 TO 1979

CAUSE OF DEATH	1979		1978		1977		1974-76	
	CRUDE DEATH RATE	RANK	CRUDE DEATH RATE	RANK	CRUDE DEATH RATE	RANK	CRUDE DEATH RATE	RANK
ALL CAUSES	694.4	XXX	687.4	XXX	691.0	XXX	705.3	XXX
Disease of Heart	160.4	1	159.4	1	166.9	1	167.8	1
Malignant Neoplasms	133.4	2	129.4	2	123.6	2	117.1	2
Accidents	77.7	3	75.7	3	81.6	3	78.2	3
Stroke	45.9	4	47.9	4	50.3	4	57.2	4
Suicide	19.6	5	17.2	6	18.8	6	18.3	6
Influenza & Pneumonia	18.9	6	25.6	5	23.2	5	34.5	5
Certain Causes of Mortality in Early Infancy	16.0	7	12.2	11	14.6	7	14.6	9
Diabetes Mellitus	15.7	8	16.7	7	12.3	9	13.6	10
Homicide	14.3	9	14.6	9	12.9	8	12.2	11
Cirrhosis of Liver	13.2	10	12.5	10	12.1	10	17.2	7
Alcoholism **	13.1	11	15.1	8	13.8	11	9.4	13
Arteriosclerosis	10.0	12	4.6	13	7.8	13	16.1	8
Bronchitis, Emphysema & Asthma	9.3	13	9.2	12	10.0	12	11.5	12

* *Rate Per 100,000 Population*

** *Includes only deaths coded 303, "Alcohol dependence syndrome," according to the Ninth Revision International Classification of Diseases. Deaths due to alcoholic cirrhosis are included in the category "Cirrhosis of Liver."*

The percentage of deaths for leading causes show marked variation among New Mexico's various ethnic/racial groups Table 3.6.

Accidents are by far the leading cause of death among Indians. Alcoholism, suicide and cirrhosis are also notably high, while the percentage of deaths due to diseases of the heart and neoplasms are comparatively low. The percentage of homicides is high among Blacks. The Hispanics show the second highest percentage of deaths due to cirrhosis of the liver.

TABLE 3.6
NEW MEXICO RESIDENT DEATHS
PERCENTAGE DISTRIBUTION OF DEATHS
BY CAUSE, ETHNIC/RACE
1977-1979 AVERAGE

CAUSE	PERCENTAGE DISTRIBUTION FOR EACH ETHNIC / RACE				
	ALL RACES	WHITE		BLACK	INDIAN
		Non-Hispanic	Hispanic		
ALL CAUSES	100.0%	100.0%	100.0%	100.0%	100.0%
Diseases of the Heart	23.5	26.8	19.9	22.9	7.7
Malignant Neoplasms	18.6	21.1	15.8	18.4	7.5
Accidents	11.3	8.6	13.8	8.1	26.6
Stroke	6.9	7.5	6.6	6.8	3.3
Influenza & Pneumonia	3.3	3.0	3.8	2.2	3.7
Suicide	2.7	2.6	2.8	0.8	3.7
Diabetes Mellitus	2.2	1.7	3.3	1.6	1.9
Alcoholism	2.0	1.1	2.6	2.9	7.2
Homicide	2.0	1.2	3.1	5.4	3.9
Cirrhosis of Liver	1.8	1.3	2.7	0.3	3.7
Bronchitis, Emphysema, Asthma	1.4	1.9	0.5	0.8	0.2
Arteriosclerosis	1.1	1.3	0.7	1.3	0.1
All Other	23.5	21.9	24.4	28.5	30.5

As already noted, diseases of the heart, malignant neoplasms, accidents and stroke rank as the four leading causes of death in New Mexico. New Mexico's crude death rate for diseases of the heart, malignant neoplasms and stroke are much lower than corresponding national rates.

The reader is reminded of the "bias" produced by the "youngness" of New Mexico's population. To obtain more accurate comparisons of New Mexico's mortality rates to national figures, New Mexico's rates must be age-adjusted in order to remove the differences caused by population age structure.

In Table 3.7 on the following page, leading causes of death are ranked by crude death rates for the United States and New Mexico. Also presented are New Mexico age-adjusted rates. The reader will note the differences made by the age-adjustment of the rates.

For example, comparison of crude death rates for diabetes mellitus show New Mexico's rate lower than the national rate, but upon age-adjustment of New Mexico's rate, the State's mortality rate from diabetes mellitus is higher than the national rate.

Heart disease and cancer rank first and second as leading causes of death for all New Mexico ethnic/racial groups except for the Indian for whom accidents are the leading cause of death. Accidents rank third for the State's other ethnic/racial populations. The percentage of accidental deaths that involve motor vehicles are generally higher for the State's various ethnic/racial populations than nationally. Suicide rates are notably high for the Indian and non-Hispanic White. Homicide rates for the Black and Indian are also high. Alcoholism and cirrhosis of the liver also show very high rates for some of New Mexico's populations.

Mortality from malignant neoplasms is higher for the State's females than for females nationally. The high overall State rate results from the high rates for the Black and non-Hispanic White females. Mortality rates for diabetes mellitus are notably high for Hispanic females in the States.

Variations are pronounced and more detailed comparisons are left to the interest of the reader (Table 3.7).

Trends in mortality rates for the six leading causes of death in New Mexico in 1979 are presented in Figure 3.5. The rate increased in 1979 over the previous year for all the six leading causes of death in the State except for stroke and influenza/pneumonia. The mortality rate for malignant neoplasms has risen approximately 59% since 1960 and the suicide rate is the highest ever recorded in the State. After peaking in 1970, mortality from diseases of the heart has dropped to a level comparable to that of 18 years ago. Mortality from stroke has dropped drastically since it peaked in 1974 (Figure 3.5).

TABLE 3.7
LEADING CAUSES OF DEATH
CRUDE AND AGE-ADJUSTED DEATH RATES
BY NEW MEXICO ETHNIC/RACE

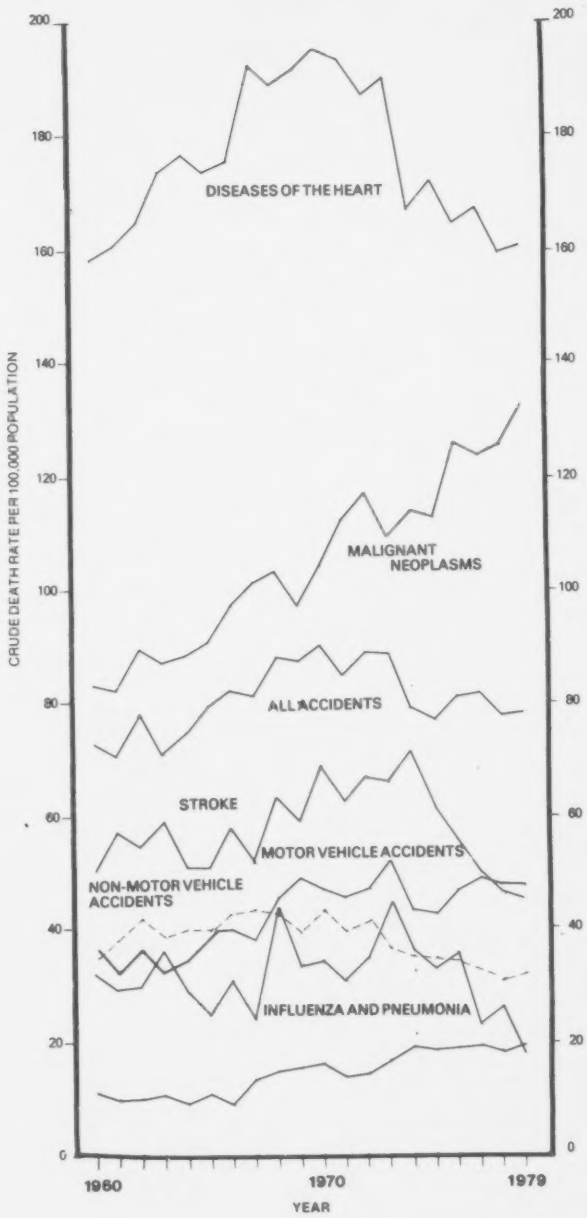
New Mexico Residents 1977-79 Average
United States 1978

RATES PER 100,000 POPULATION	Crude Death Rate	New Mexico Adjusted Death Rate		
		Total	Male	Female
UNITED STATES:				
Heart Disease	334.3	XXX	375.3	295.5
Malignant Neoplasms	181.9	XXX	203.5	161.4
Stroke	80.5	XXX	69.4	91.0
All Accidents	48.4	XXX	69.6	28.3
(% Motor Vehicle)	49.6%	XXX	51.6%	45.0%
Influenza & Pneumonia	26.7	XXX	29.0	24.6
Diabetes Mellitus	15.5	XXX	13.1	17.8
Cirrhosis of Liver	13.8	XXX	18.6	9.3
Arteriosclerosis	13.3	XXX	10.9	15.5
Suicide	12.5	XXX	19.0	6.3
Certain Causes of Mortality in Early Infancy*	10.1	XXX	12.0	8.3
NEW MEXICO-All Races:				
Heart Disease	162.5	252.7	265.8	231.9
Malignant Neoplasms	129.1	185.7	187.6	178.3
All Accidents	78.5	90.3	132.3	50.0
(% Motor Vehicle)		61.7%	63.1%	57.7%
Stroke	48.1	78.0	61.6	93.9
Influenza & Pneumonia	22.6	36.4	34.1	36.5
Suicide	18.6	21.4	34.6	8.3
Diabetes Mellitus	14.9	21.8	18.5	25.3
Certain Causes of Mortality in Early Infancy*	14.3	10.6	12.5	8.7
Alcoholism	14.0	16.5	26.2	6.9
Cirrhosis of Liver	12.7	15.6	21.8	9.3
NON-HISPANIC WHITE:				
Heart Disease	228.3	293.5	323.8	258.9
Malignant Neoplasms	180.2	214.5	230.1	195.7
All Accidents	73.5	82.2	113.6	51.8
(% Motor Vehicle)		56.2%	58.3%	51.2%
Stroke	64.0	86.3	69.7	102.1
Influenza & Pneumonia	25.6	35.2	35.4	33.6
Suicide	21.8	23.7	36.9	10.8
Bronchitis, Emphysema & Asthma	16.0	19.8	28.6	10.1
Diabetes Mellitus	14.8	18.1	15.4	20.9
Certain Causes of Mortality in Early Infancy*	12.5	11.9	13.9	10.1
Arteriosclerosis	11.5	16.7	12.9	20.2
HISPANIC WHITE:				
Heart Disease	96.6	184.5	187.6	176.1
Malignant Neoplasms	76.5	138.3	126.4	147.2
All Accidents	67.1	80.6	128.5	34.9
(% Motor Vehicle)		67.5%	68.4%	64.1%
Stroke	32.1	62.7	50.6	74.9
Influenza & Pneumonia	18.6	34.2	29.2	38.3
Diabetes Mellitus	15.8	29.5	25.6	34.3
Homicide	15.3	17.7	30.3	5.9
Certain Causes of Mortality in Early Infancy*	14.0	9.0	10.1	7.8
Suicide	13.6	16.2	28.0	4.9
Cirrhosis of Liver	13.3	19.5	29.9	8.5
BLACK:				
Heart Disease	122.4	256.2	262.5	243.9
Malignant Neoplasms	97.9	190.7	180.2	202.5
All Accidents	43.2	51.8	69.5	32.6
(% Motor Vehicle)		43.3%	45.0%	40.0%
Stroke	36.0	79.3	73.0	84.5
Homicide	28.8	36.9	61.4	14.9
Certain Causes of Mortality in Early Infancy*	27.4	16.7	31.9	3.3
Alcoholism	15.8	23.9	37.6	7.3
Influenza & Pneumonia	11.5	21.5	25.9	14.9
Diabetes Mellitus	8.6	17.4	19.7	14.4
Bronchitis, Emphysema & Asthma	4.3	7.8	20.3	--
INDIAN:				
All Accidents	172.7	221.6	349.9	103.0
(% Motor Vehicle)		66.9%	65.4%	72.4%
Heart Disease	50.4	103.6	109.9	89.1
Malignant Neoplasms	48.9	99.9	93.7	103.5
Alcoholism	46.8	70.6	113.9	33.2
Homicide	25.5	33.5	60.5	9.5
Certain Causes of Mortality in Early Infancy*	24.5	11.3	13.5	9.3
Suicide	24.1	27.8	54.4	5.0
Influenza & Pneumonia	23.8	38.4	32.9	47.7
Cirrhosis of Liver	23.8	37.1	47.7	30.2
Stroke	21.3	46.1	31.4	61.5

*Certain Causes of Perinatal Mortality ICDA 760-769.2, 769.4-772, 774-778

The mortality rate for accidental death in the State increased in 1979 due to an increase in non-motor vehicle accident mortality (Figure 3.5).

FIGURE 3.5
NEW MEXICO RESIDENT DEATHS
CRUDE DEATH RATES PER 100,000 POPULATION
SELECTED CAUSES
1960-1979



LEADING CAUSES BY AGE

Nearly twice the percentage of deaths in New Mexico occur to persons under 35 years of age as compared to national figures. Of deaths occurring nationally, 8.4% are persons younger than 35 years of age; in New Mexico the figure is 16%.

The percentage of deaths of males under 35 years of age is 85% higher for New Mexico than nationally. The percentage of Indian males in the State dying before their thirty-fifth birthday is over four times the national percentage. For the Black and Hispanic male, the percentage is twice that nationally. The percentage distribution of deaths of New Mexico's non-Hispanic White males most closely resembles that nationally, but still the percentage of deaths of males under 35 is 25% higher, The percentage of male deaths under one year of age for Blacks and Indians is notable (Table 3.8).

The percentage of female deaths under 35 years of age is lower than that for males. However, the percentage in New Mexico exceed the percentage nationally, and is highest for Indian and Hispanic women. The percentage of deaths to women under 35 years of age is lowest for non-Hispanic White women in the State, but even this percentage exceeds the national percentage by 33% (Table 3.8).

TABLE 3.8
PERCENTAGE OF DEATHS BY AGE GROUPS, SEX AND RACE/ETHNIC GROUPS
NEW MEXICO RESIDENTS 1977-79
UNITED STATES 1978

SEX / RACE	TOTAL	PERCENTAGE DISTRIBUTION BY AGE GROUPS				
		< 1	1-14	15-34	35-64	65+
NEW MEXICO						
TOTAL	25171	4.0%	1.9%	10.1%	27.9%	56.0%
Male						
All Races	15128	3.9	1.9	12.9	30.4	50.8
Non-Hispanic White	9335	2.6	1.2	8.9	31.0	56.2
Hispanic White	4330	5.1	2.7	16.9	28.0	47.2
Black	224	12.0	4.0	8.5	37.9	37.5
Indian	1226	8.1	4.2	29.8	32.5	25.3
Female						
All Races	10043	4.2	1.8	5.8	24.4	63.9
Non-Hispanic White	6822	2.8	1.1	4.2	23.9	67.9
Hispanic White	2461	6.6	2.8	7.2	23.2	60.2
Black	146	4.8	3.4	7.5	34.9	49.3
Indian	606	9.1	5.9	16.5	30.9	37.6
UNITED STATES						
TOTAL	XXX	2.4	1.1	4.9	25.5	66.1
Male						
Total	XXX	2.4	1.2	6.5	29.7	60.1
White	XXX	2.0	1.0	5.9	28.2	62.5
Other	XXX	5.7	2.1	10.3	37.7	44.1
Female						
Total	XXX	2.3	0.9	2.9	20.5	73.2
White	XXX	1.8	0.8	2.6	19.1	75.7
Other	XXX	5.9	1.9	5.7	31.5	54.9

One factor contributing to these high percentages of younger deaths in New Mexico is, of course, the State's young population structure. But, also the high rates of mortality in the State for causes such as accidents, normally associated with younger age groups, would lead one to suspect higher rates of mortality within these age groups. Rates of mortality by causes of death are presented by age groups in Tables 3.9 to 3.16. Comparison of mortality rates per 100,000 population in the age groups will provide insight into levels of mortality for the various age groups in the State.

Ages Less than One:

Mortality of infants less than one year of age per 100,000 population is lower than nationally for New Mexico Whites, but higher for Blacks and Indians. The rate is higher for males than for females. Causes are similar though the actual rates differ in comparing State data and national data. Further analysis of infant deaths per live births is presented in the section on Infant Mortality.

TABLE 3.9
AGES UNDER 1 YEAR
AGE-SPECIFIC DEATH RATES
LEADING CAUSES BY NEW MEXICO ETHNIC/RACE
New Mexico Residents 197-79 Average
United States 1978

NEW MEXICO ETHNIC/RACE	RATE/ 100,000 POPULATION		
	TOTAL	MALE	FEMALE
UNITED STATES			
All Causes:	1434.4	1591.7	1269.6
Certain Causes of Mortality in Early Infancy*	686.5	772.7	596.1
Congenital Anomalies	262.4	274.6	249.6
Influenza/Pneumonia	47.9	51.9	43.6
Accidents	39.4	42.1	36.6
(% Motor Vehicle)	(20.8)	(17.8)	(24.6)
NEW MEXICO-All Races			
All Causes:	1415.2	1615.3	1202.5
Certain Causes of Mortality in Early Infancy*	712.5	803.6	615.6
Congenital Anomalies	232.8	257.0	207.1
Influenza/Pneumonia	53.0	64.9	40.3
Accidents	32.1	29.8	34.5
(% Motor Vehicle)	(21.7)	(27.3)	(16.7)
NON-HISPANIC-White			
All Causes:	1538.9	1662.6	1405.6
Certain Causes of Mortality in Early Infancy*	813.3	892.1	721.0
Congenital Anomalies	231.4	229.8	233.0
Influenza/Pneumonia	45.6	54.1	36.4
Accidents	31.5	33.8	29.1
(% Motor Vehicle)	(33.3)	(20.0)	(50.0)
HISPANIC-White			
All Causes:	1202.7	1348.9	1047.1
Certain Causes of Mortality in Early Infancy*	598.2	644.1	549.4
Congenital Anomalies	216.1	224.8	206.8
Influenza/Pneumonia	40.7	60.8	19.4
Accidents	31.3	24.3	38.8
(% Motor Vehicle)	(20.0)	(50.0)	(0)
BLACK			
All Causes:	2031.1	3284.7	821.6
Certain Causes of Mortality in Early Infancy*	1135.0	2068.1	234.7
Congenital Anomalies	179.2	365.0	--
Accidents	119.5	243.3	--
(% Motor Vehicle)	(0)	(0)	(0)
INDIAN			
All Causes:	1719.7	2159.7	1258.3
Certain Causes of Mortality in Early Infancy*	759.4	872.6	640.6
Congenital Anomalies	312.7	436.3	183.0
Influenza/Pneumonia	122.8	130.9	114.4
Accidents	22.3	--	45.8
(% Motor Vehicle)	(0.)	(0)	(0)

*Certain Causes of Perinatal Mortality ICDA 760-769.2, 769.4-772, 774-778.

Ages 1 to 4:

Accidents are the leading cause of death in this age group, though rates for New Mexican's are higher than nationally with generally a larger percentage involving motor vehicles. Expecially high are the rates for Indians and Blacks. Mortality rates in this age group are higher for males than for females and overall mortality is higher in the State than nationally.

TABLE 3.10
AGES 1-4
AGE-SPECIFIC DEATH RATES
LEADING CAUSES BY NEW MEXICO ETHNIC/RACE
NEW MEXICO RESIDENTS 1977-79 AVERAGE
UNITED STATES 1978

NEW MEXICO ETHNIC/RACE	RATE/ 100,000 POPULATION		
	TOTAL	MALE	FEMALE
UNITED STATES			
All Causes:	69.2	78.2	59.9
Accidents	28.8	33.6	23.8
(% Motor Vehicle)	(36.7)	(34.5)	(39.5)
Congenital Anomalies	8.4	9.0	7.9
Malignant Neoplasms	4.9	5.5	4.3
Influenza/Pneumonia	2.9	2.7	2.8
Homicide	2.6	2.8	2.4
NEW MEXICO-All Races			
All Causes:	79.4	95.6	63.0
Accidents	41.0	49.2	32.6
(% Motor Vehicle)	(50.0)	(49.3)	(51.1)
Congenital Anomalies	5.7	7.8	3.6
Homicide	4.0	4.3	3.6
Influenza/Pneumonia	3.6	3.6	3.6
Malignant Neoplasms	2.2	2.9	1.4
NON-HISPANIC White			
All Causes:	68.8	81.6	55.5
Accidents	34.0	42.5	25.2
(% Motor Vehicle)	(34.1)	(30.8)	(40.0)
Congenital Anomalies	5.0	6.5	3.4
Influenza/Pneumonia	4.1	4.9	3.4
Homicide	2.5	--	5.0
Malignant Neoplasms	1.7	1.6	1.7
HISPANIC-White			
All Causes:	73.3	89.8	56.3
Accidents	37.1	39.9	34.1
(% Motor Vehicle)	(54.5)	(50.0)	(60.0)
Congenital Anomalies	6.7	10.0	3.4
Homicide	5.1	8.3	1.7
Certain Causes of Mortality in Early Infancy	4.2	3.3	3.4
Malignant Neoplasms	3.4	5.0	1.7
Influenza/Pneumonia	2.5	3.3	1.7
BLACK			
All Causes:	92.0	99.3	85.8
Accidents	30.7	33.1	28.6
(% Motor Vehicle)	(50.0)	(100.0)	(--)
Bronchitis, Emphysema, Asthma	15.3	33.1	--
Congenital Anomalies	15.3	33.1	--
INDIAN			
All Causes:	141.9	172.0	113.2
Accidents	87.1	191.1	56.6
(% Motor Vehicle)	(66.7)	(72.2)	(55.6)
Influenza/Pneumonia	6.4	--	12.6
Homicide	6.4	6.6	6.3
Congenital Anomalies	3.2	--	6.3

Ages 5 to 14:

As was the case for the previous age group, accidents are the leading cause of death for ages 5-14. New Mexico's accidental mortality rate and overall mortality rate are lower than corresponding national rates for the White components of the population, but higher for Blacks and Indians. Motor vehicles are involved in a greater percentage of New Mexico accident fatalities than nationally.

Mortality rates are generally higher for males than for females. Accident mortality for all the State's females in this age group is higher than for females nationally.

TABLE 3.11
AGES 5-14
AGE-SPECIFIC DEATH RATES
LEADING CAUSES BY NEW MEXICO ETHNIC/RACE
NEW MEXICO RESIDENTS 1977-79 AVERAGE
UNITED STATES 1978

NEW MEXICO ETHNIC/RACE	RATE/ 100,000 POPULATION		
	TOTAL	MALE	FEMALE
UNITED STATES			
All Causes:	33.9	41.4	26.1
Accidents	17.2	23.2	11.1
(% Motor Vehicle)	(51.2)	(48.3)	(56.8)
Malignant Neoplasms	4.2	4.8	3.6
Congenital Anomalies	1.8	1.9	1.8
Homicide	1.3	1.4	1.2
Diseases of Heart	1.0	1.0	1.0
NEW MEXICO-All Races			
All Causes:	29.0	35.8	22.0
Accidents	16.1	19.6	12.3
(% Motor Vehicle)	(60.3)	(51.7)	(75.5)
Malignant Neoplasms	3.1	4.7	1.4
Congenital Anomalies	1.6	2.0	1.2
Homicide	1.4	1.4	1.4
Suicide	0.6	0.7	0.5
NON-HISPANIC-White			
All Causes:	26.9	32.3	21.3
Accidents	14.9	18.5	11.2
(% Motor Vehicle)	(57.9)	(44.4)	(81.0)
Malignant Neoplasms	3.4	4.6	2.1
Homicide	1.6	1.0	2.1
Congenital Anomalies	1.0	1.5	0.5
Suicide	0.8	1.0	0.5
HISPANIC-White			
All Causes:	25.5	32.4	18.4
Accidents	13.8	17.0	10.5
(% Motor Vehicle)	(69.8)	(69.7)	(70.0)
Malignant Neoplasms	2.9	4.6	1.1
Homicide	1.3	1.5	1.1
Congenital Anomalies	1.3	1.5	1.1
Influenza/Pneumonia	1.0	1.5	0.5
BLACK			
All Causes:	42.7	62.9	21.7
Accidents	37.3	52.4	21.7
(% Motor Vehicle)	(28.6)	(40.0)	--
Malignant Neoplasms	5.3	10.5	--
INDIAN			
All Causes:	51.7	62.9	41.3
Accidents	28.2	31.4	25.2
(% Motor Vehicle)	(54.2)	(30.8)	(81.8)
Congenital Anomalies	5.9	7.2	4.6
Malignant Neoplasms	2.4	4.8	--
Homicide	1.2	2.4	--

Ages 15 to 24:

The 15-24 year old age group could be termed "the age of violent death." Nationally, accidents are the leading cause of death in this age group, followed by homicide and suicide. In New Mexico suicide exceeds homicide though both are higher than nationally. Mortality rates are much higher for males than for females, and New Mexico's rates are much higher than nationally for all but the Black population. Accidents, suicide, homicide and alcoholism rank as leading causes of death among the Indian.

TABLE 3.12
AGES 15-24
LEADING CAUSES BY NEW MEXICO ETHNIC/RACE
NEW MEXICO RESIDENTS 1977-79 AVERAGE
UNITED STATES 1978

NEW MEXICO ETHNIC/RACE	RATE/ 100,000 POPULATION		
	TOTAL	MALE	FEMALE
UNITED STATES			
All Causes:	117.5	173.5	60.9
Accidents	64.5	100.5	28.0
(% Motor Vehicle)	(71.9)	(70.1)	(78.9)
Homicide	13.2	20.4	5.9
Suicide	12.4	20.0	4.7
Malignant Neoplasms	6.3	7.7	4.9
Heart Disease	2.7	3.2	2.1
NEW MEXICO-All Races			
All Causes:	198.7	315.9	83.4
Accidents	120.0	198.1	43.2
(% Motor Vehicle)	(79.4)	(77.5)	(87.8)
Suicide	28.2	49.2	7.6
Homicide	18.7	30.8	6.7
Malignant Neoplasms	7.4	8.6	6.1
Alcoholism	2.6	4.4	0.9
NON-HISPANIC-White			
All Causes:	181.5	277.6	83.7
Accidents	111.2	177.1	44.0
(% Motor Vehicle)	(79.0)	(77.3)	(85.9)
Suicide	26.4	44.4	8.1
Homicide	14.4	21.3	7.4
Malignant Neoplasms	8.0	10.3	5.6
Heart Disease	2.8	3.7	1.9
HISPANIC-White			
All Causes:	176.8	292.1	66.9
Accidents	105.7	183.0	32.1
(% Motor Vehicle)	(81.1)	(79.2)	(91.3)
Suicide	24.3	43.2	6.3
Homicide	20.7	35.9	6.3
Malignant Neoplasms	6.8	7.3	6.3
Heart Disease	1.4	0.7	2.1
BLACK			
All Causes:	78.0	79.0	76.9
Accidents	14.2	13.2	15.4
(% Motor Vehicle)	(100.0)	(100.0)	(100.0)
Homicide	14.2	26.3	--
Heart Disease	7.1	13.2	--
Malignant Neoplasms	7.1	13.2	--
Congenital Anomalies	7.1	13.2	--
INDIAN			
All Causes:	463.2	784.3	175.6
Accidents	285.3	486.3	105.4
(% Motor Vehicle)	(76.6)	(74.2)	(86.7)
Suicide	68.6	129.4	14.0
Homicide	37.1	70.6	7.0
Alcoholism	20.4	31.4	10.5
Influenza/Pneumonia	7.4	11.8	3.5

Ages 25 to 44:

For ages 25-44 accidents remain as the leading cause of death. Nationally malignant neoplasms and heart disease have moved into the next two leading causes of death. In New Mexico accidents, suicide, homicide and alcoholism make up four of the five leading causes of death. Alcoholism ranks second for the Indian population. Homicide ranks highest for the Black population.

Mortality rates are much higher for males than for females in this age bracket. Overall State mortality rates greatly exceed national rates. This pattern holds true for most causes of death. Again motor vehicles are involved in a higher percentage of accident fatalities in the State than nationally.

TABLE 3.13
AGES 25-44
AGE-SPECIFIC DEATH RATES
LEADING CAUSES BY NEW MEXICO ETHNIC/RACE
NEW MEXICO RESIDENTS 1977-79 AVERAGE
UNITED STATES 1978

NEW MEXICO ETHNIC/RACE	RATE/ 100,000 POPULATION		
	TOTAL	MALE	FEMALE
UNITED STATES			
All Causes:	178.8	242.9	116.9
Accidents	43.0	69.0	17.8
(% Motor Vehicle)	(58.4)	(57.2)	(62.5)
Malignant Neoplasms	29.0	26.9	31.0
Heart Disease	24.4	37.2	11.9
Suicide	16.3	24.0	8.9
Homicide	15.7	25.8	6.0
NEW MEXICO-All Races			
All Causes:	271.9	402.7	148.8
Accidents	91.2	148.5	37.0
(% Motor Vehicle)	(67.8)	(66.5)	(73.1)
Suicide	30.4	48.1	13.7
Homicide	26.5	43.6	10.4
Malignant Neoplasms	24.9	23.6	26.2
Alcoholism	18.6	31.4	6.7
NON-HISPANIC-White			
All Causes:	231.7	308.7	155.9
Accidents	75.0	115.1	36.9
(% Motor Vehicle)	(64.0)	(61.9)	(69.7)
Suicide	32.0	45.5	18.7
Malignant Neoplasms	30.5	27.0	33.2
Homicide	17.4	25.7	9.1
Heart Disease	16.1	26.1	6.2
HISPANIC-White			
All Causes:	259.9	429.3	106.6
Accidents	87.5	157.1	24.5
(% Motor Vehicle)	(71.3)	(70.7)	(75.0)
Homicide	34.4	61.6	9.8
Suicide	28.0	49.4	8.6
Cirrhosis of Liver	17.4	33.9	2.5
Alcoholism	17.0	30.5	5.5
BLACK			
All Causes:	272.1	359.9	187.1
Homicide	75.9	128.5	24.9
Accidents	31.6	38.6	24.9
(% Motor Vehicle)	(40.0)	(66.7)	(--)
Heart Disease	25.3	38.6	12.5
Malignant Neoplasms	25.3	12.9	37.4
Alcoholism	19.0	12.9	12.5
INDIAN			
All Causes:	701.4	1143.3	327.6
Accidents	264.5	442.0	114.3
(% Motor Vehicle)	(71.6)	(68.6)	(81.1)
Alcoholism	117.2	1143.3	37.1
Cirrhosis of Liver	58.6	91.3	30.9
Homicide	50.2	84.0	21.6
Suicide	40.2	76.2	9.3

Ages 45-64:

Nationally, in the 45-64 age group, heart disease, cancer and stoke have established their "top three" ranking, which they will not relinquish through all the remaining ages.

Mortality rates are higher than nationally for Blacks and Indians. Accidents still rank as the leading cause of death among Indians, but rank third for the State as a whole.

Alcoholism, cirrhosis and suicide remain among the leading causes for the State's various ethnic/racial groups. The percentage of motor vehicle fatalities remain higher than nationally.

TABLE 3.14
AGES 45-64
AGE-SPECIFIC DEATH RATES
LEADING CAUSES BY NEW MEXICO ETHNIC/RACE

New Mexico Residents 1977-79 Average
United States 1978

NEW MEXICO ETHNIC/RACE	RATE/ 100,000 POPULATION		
	TOTAL	MALE	FEMALE
UNITED STATES			
All Causes:	989.9	1313.4	692.2
Heart Disease	345.5	527.6	177.9
Malignant Neoplasms	305.7	345.7	268.9
Cerebrovascular	49.4	55.0	44.3
Accidents	42.8	64.3	23.1
(% *Motor Vehicle*)	(42.8)	(41.7)	(45.5)
Cirrhosis of Liver	37.5	51.7	24.4
NEW MEXICO-All Races			
All Causes:	914.5	1209.7	632.4
Malignant Neoplasms	242.5	265.3	220.8
Heart Disease	212.8	322.6	108.3
Accidents	80.1	125.4	36.7
(% *Motor Vehicle*)	(56.2)	(55.1)	(60.1)
Alcoholism	40.2	64.0	17.4
Cerebrovascular	36.0	39.4	37.2
NON-HISPANIC-White			
All Causes:	991.1	1315.5	686.1
Malignant Neoplasms	298.6	339.9	256.3
Heart Disease	252.2	393.1	119.6
Accidents	69.2	104.0	36.5
(% *Motor Vehicle*)	(50.1)	(48.5)	(53.3)
Cerebrovascular	38.6	44.5	33.1
Suicide	28.6	40.9	17.0
HISPANIC-White			
All Causes:	698.1	928.7	474.0
Malignant Neoplasms	153.7	140.2	166.9
Heart Disease	143.7	208.3	81.0
Accidents	72.1	123.0	22.7
(% *Motor Vehicle*)	(66.6)	(64.5)	(78.2)
Alcoholism	52.1	86.4	18.8
Cirrhosis of Liver	45.1	75.2	15.8
BLACK			
All Causes:	1222.4	1598.2	878.3
Heart Disease	316.5	411.0	230.0
Malignant Neoplasms	240.1	319.6	167.3
Accidents	109.1	137.0	83.6
(% *Motor Vehicle*)	(60.0)	(50.0)	(75.0)
Alcoholism	76.4	137.0	20.9
Cerebrovascular	65.5	68.5	62.7
INDIAN			
All Causes:	1253.1	1698.0	833.2
Accidents	265.0	431.2	108.1
(% *Motor Vehicle*)	(58.0)	(56.1)	(64.7)
Alcoholism	130.9	222.4	44.5
Heart Disease	127.6	168.5	89.0
Malignant Neoplasms	124.3	134.8	114.5
Cirrhosis of Liver	88.3	101.1	76.3

Ages 65 to 74:

By ages 65-74 accidents have dropped to the sixth ranked cause of death nationally. It is important to note that this drop is not due to a lower accident mortality rate for this age group, but rather to the higher mortality rates, from heart disease, cancer, etc., which appear with advancing age.

In New Mexico, accidents rank fourth. Mortality rates for many causes notably exceed national levels among the various ethnic/race groups.

Higher than national percentages of accidents involve motor vehicles, especially among the Spanish, but rates are highest among the Indian.

TABLE 3.15
AGES 65-74
AGE-SPECIFIC DEATH RATES
LEADING CAUSES BY NEW MEXICO ETHNIC/RACE

New Mexico Residents 1977-79 Average
United States 1978

NEW MEXICO ETHNIC/RACE	RATE/ 100,000 POPULATION		
	TOTAL	MALE	FEMALE
UNITED STATES			
All Causes:	3027.2	4185.4	2137.6
Heart Disease	1230.8	1761.6	823.1
Malignant Neoplasms	800.7	1076.7	588.7
Cerebrovascular	234.6	290.0	207.9
Influenza/Pneumonia	65.8	96.1	42.5
Diabetes Mellitus	64.5	64.4	64.5
Accidents	60.7	86.9	40.6
(% *Motor Vehicle*)	(35.4)	(35.4)	(35.5)
NEW MEXICO-All Races			
All Causes:	3366.8	4450.5	2411.6
Heart Disease	991.0	1395.1	634.8
Malignant Neoplasms	902.7	1102.0	727.1
Cerebrovascular	229.9	257.3	205.7
Accidents	111.8	163.1	66.6
(% *Motor Vehicle*)	(46.1)	(48.8)	(40.3)
Diabetes Mellitus	95.7	87.5	102.9
NON-HISPANIC-White			
All Causes:	3745.4	5227.0	2555.8
Heart Disease	1144.4	1704.3	694.8
Malignant Neoplasms	1061.5	1380.1	805.6
Cerebrovascular	241.0	271.6	216.4
Bronchitis, Emphysema, Asthma	120.0	203.7	52.8
Accidents	100.5	131.4	75.6
(% *Motor Vehicle*)	(41.7)	(43.3)	(39.5)
HISPANIC-White			
All Causes:	2696.3	3339.6	2045.8
Heart Disease	754.0	996.9	508.3
Malignant Neoplasms	641.2	697.8	583.9
Cerebrovascular	210.9	245.1	176.4
Diabetes Mellitus	146.2	116.3	176.4
Accidents	112.8	186.9	37.8
(% *Motor Vehicle*)	(51.8)	(51.1)	(55.6)
BLACK			
All Causes:	3393.2	3453.5	3324.8
Malignant Neoplasms	1037.9	900.9	1193.5
Heart Disease	998.0	1126.1	852.5
Cerebrovascular	359.3	300.3	426.3
Diabetes Mellitus	79.8	150.2	--
Arteriosclerosis	79.8	--	170.5
INDIAN			
All Causes:	2641.6	2908.1	2334.7
Heart Disease	444.6	439.9	450.1
Malignant Neoplasms	418.5	513.2	309.4
Accidents	287.7	415.4	140.6
(% *Motor Vehicle*)	(54.5)	(64.7)	(20.0)
Cerebrovascular	170.0	171.1	168.8
Diabetes Mellitus	143.8	171.1	112.5

Ages 75 and Older:

Heart disease, cancer and stroke rank, in that order, as leading causes of death nationally. In New Mexico cancer ranks second and stroke third.

TABLE 3.12
AGES 75 AND OVER
AGE-SPECIFIC DEATH RATES
LEADING CAUSES BY NEW MEXICO ETHNIC/RACE

New Mexico Residents 1977-79 Average
United States 1978

NEW MEXICO ETHNIC/RACE	RATE/ 100,000 POPULATION		
	TOTAL	MALE	FEMALE
UNITED STATES			
All Causes:	9004.1	11030.8	7861.6
Heart Disease	4132.6	4884.7	3708.8
Malignant Neoplasms	1331.7	1909.5	1005.8
Cerebrovascular	1241.7	1247.8	1238.5
Influenza/Pneumonia	401.8	523.2	333.3
Arteriosclerosis	263.4	264.6	262.9
Accidents	165.0	213.7	137.6
(% Motor Vehicle)	(17.8)	(23.4)	(13.0)
NEW MEXICO-All Races			
All Causes:	9464.6	10661.2	8514.7
Heart Disease	3039.7	3332.1	2809.5
Malignant Neoplasms	1506.2	1792.9	1278.7
Cerebrovascular	1185.8	1110.7	1245.4
Influenza/Pneumonia	559.1	664.9	475.1
Accidents	293.2	327.5	265.9
(% Motor Vehicle)	(19.7)	(29.3)	(10.3)
Arteriosclerosis	235.4	229.0	240.5
NON-HISPANIC-White			
All Causes:	10400.5	11964.8	9306.9
Heart Disease	3533.4	3963.2	3233.0
Malignant Neoplasms	1637.6	2046.5	1351.7
Cerebrovascular	1337.9	1259.7	1392.7
Influenza/Pneumonia	552.7	703.1	447.6
Accidents	313.4	334.8	298.4
(% Motor Vehicle)	(23.4)	(30.0)	(9.8)
Arteriosclerosis	304.8	280.4	321.8
HISPANIC-White			
All Causes:	8142.9	9263.4	7075.2
Heart Disease	2416.6	2681.9	2163.9
Malignant Neoplasms	1348.6	1546.4	1160.2
Cerebrovascular	995.1	971.2	1017.9
Influenza/Pneumonia	579.6	642.5	519.6
Diabetes Mellitus	284.3	276.4	291.8
Accidents	244.2	291.3	199.3
(% Motor Vehicle)	(20.9)	(30.8)	(7.1)
BLACK			
All Causes:	7419.0	8796.3	6285.7
Heart Disease	2716.8	3009.3	2476.2
Malignant Neoplasms	1462.9	1620.4	1333.3
Cerebrovascular	940.4	1157.4	761.9
Arteriosclerosis	209.0	463.0	190.5
Diabetes Mellitus	104.5	--	190.5
Accidents	104.5	231.5	--
(% Motor Vehicle)	(0)	(0)	(0)
INDIAN			
All Causes:	623.3	6715.9	6505.2
Heart Disease	946.2	1195.5	628.1
Malignant Neoplasms	906.8	879.0	942.1
Influenza/Pneumonia	630.8	527.4	762.7
Cerebrovascular	551.9	492.3	628.1
Accidents	374.5	457.1	269.2
(% Motor Vehicle)	(26.3)	(23.1)	(33.3)

State mortality rates for ages 75 and older are lower than nationally for heart disease and stroke, but higher rates are noted for cancer, influenza/pneumonia, accidents and arteriosclerosis. Overall mortality rates are lower than nationally for the Hispanic, Black and Indian.

Accident mortality rates in the 75 and older age group are the highest of any age group, but the lower ranking as a cause of death results from higher rates for those causes usually associated with old age.

In Tables 3.17 and 3.18, (pages 46 and 47), age and cause specific death rates for the United States and New Mexico's various populations are presented for males and females respectively. The comparisons to be drawn are many and are left to the interest of the reader.

CAUSES BY COUNTY

Age-adjusted mortality rates by sex, and county are presented in Table 3.19 on page 45.

The rates have been age-adjusted to eliminate the effect created by the variations in the age structure of the county populations.

The highest overall natality rates in the State are found in Socorro County for both males and females.

McKinley County males register the highest accident mortality rate, while Catron County females have the highest accident mortality rate among females.

The highest mortality rates for alcoholism are those for McKinley County males. Also notably high are the rates for males in Sandoval, Rio Arriba, San Miguel and Taos County. For females, the rate in McKinley County is exceptionally high.

Mora County registered the highest homicide fatality rate for males. Rio Arriba was second highest.

High mortality rates for suicide for males are noted in several of the State's counties—highest in Lincoln County. The highest female suicide mortality is found in San Miguel County.

Cirrhosis of the liver mortality rates are highest for Rio Arriba County males, and for females the rate is highest for Otero County.

Stroke mortality rates are generally higher for females than for males. The highest cancer mortality rate in the State is for Socorro County females. For males, the rate is highest for Los Alamos County (Table 3.19).

Further breakdown of selected causes of death by county is presented in Table A-9 through A-11 of the Appendix. A breakdown of deaths by county and city is presented in Table A-6.

TABLE 3.19
AGE-ADJUSTED MORTALITY RATES
BY SELECTED CAUSES
NEW MEXICO RESIDENTS BY COUNTY
1977-79 AVERAGE
(Deaths Per 100,000 Population)

COUNTY	ALL CAUSES	Disease of Heart 390-398 402,404 410-429	Malignant Neoplasms 140-209	Accidents E800-E949	Stroke 430-438	Influenza Pneumonia 470-474 480-486	Diabetes Mellitus 250	Cirrhosis of Liver 571	Bronchitis Emphysema Asthma 490-493	Suicide E950-E959	Arterio-sclerosis 440	Homicide E960-E978	Alcoholism 303
DISTRICT I													
McKinley:													
Male	1195.7	495.1	115.9	307.9	39.9	58.7	13.3	35.1	6.9	99.1	—	35.1	81.0
Female	562.6	151.3	99.5	98.1	67.8	59.7	46.9	23.1	8.2	8.5	11.2	13.9	32.1
San Juan:													
Male	1115.1	229.2	155.9	260.7	57.9	27.6	9.6	7.8	15.2	36.6	5.3	39.0	36.5
Female	853.0	177.1	167.9	85.8	71.3	66.0	23.7	9.8	—	11.7	11.2	6.7	8.2
DISTRICT II													
Colfax:													
Male	836.5	233.8	128.9	99.1	51.6	29.0	2.9	11.8	16.3	69.9	10.3	23.7	18.7
Female	829.9	269.3	206.8	20.9	32.7	29.5	48.9	22.7	9.9	15.7	16.7	—	—
Los Alamos:													
Male	1369.1	269.8	285.8	72.7	29.9	110.1	—	—	—	65.9	39.3	6.1	5.5
Female	686.0	187.7	131.7	89.6	96.8	21.8	—	—	—	5.6	—	—	—
Mora:													
Male	1003.8	175.7	99.2	295.0	73.3	50.8	36.3	93.1	—	28.0	—	79.1	—
Female	488.3	102.8	316.1	100.7	108.0	39.7	17.3	—	—	—	—	—	—
Rio Arriba:													
Male	1251.8	226.1	129.9	203.5	70.6	91.3	25.3	50.0	7.9	57.0	5.3	72.9	61.7
Female	1006.2	255.3	191.8	71.7	195.6	95.9	37.9	5.3	10.0	8.6	16.9	9.0	9.9
San Miguel:													
Male	1097.9	235.6	156.1	125.2	72.9	32.5	10.3	39.7	2.8	38.9	7.3	93.1	95.2
Female	759.9	201.7	127.9	29.6	89.7	36.9	20.1	9.6	3.1	18.9	16.9	9.7	3.1
Santa Fe:													
Male	853.2	199.2	138.5	99.2	55.2	35.8	19.8	22.1	11.9	91.2	9.8	19.9	21.8
Female	790.8	168.1	172.1	48.8	79.8	28.9	23.3	10.9	5.8	6.3	11.6	9.5	7.7
Taos:													
Male	872.8	189.8	199.1	195.8	59.2	38.9	26.5	90.2	6.2	36.9	2.9	27.9	95.3
Female	730.9	219.6	90.9	90.9	122.1	56.2	27.9	8.3	9.5	11.2	9.5	3.6	—
DISTRICT III													
Bernalillo:													
Male	1030.9	259.3	209.9	87.6	55.2	31.5	22.9	19.1	11.9	35.1	8.3	22.1	22.6
Female	867.3	231.9	196.9	36.8	95.9	33.2	21.9	7.9	8.3	10.6	13.9	7.2	7.0
Sandoval:													
Male	1165.8	237.9	172.1	237.3	69.7	9.0	19.9	31.6	5.9	31.3	19.5	29.0	56.9
Female	863.0	175.1	165.2	62.9	89.1	29.8	22.9	3.2	7.7	3.9	9.5	8.9	5.8
Torrance:													
Male	960.9	239.5	155.2	222.8	30.7	23.2	7.1	9.8	13.9	21.2	9.8	26.0	11.1
Female	561.6	95.1	191.9	93.8	116.8	8.5	21.7	—	—	8.5	8.5	—	—
Valencia:													
Male	1242.9	287.9	159.9	239.1	69.6	40.0	19.6	30.6	18.3	38.5	16.2	35.8	31.9
Female	1052.6	299.2	233.3	70.8	97.6	33.1	26.9	3.0	7.6	3.0	27.6	10.5	11.3
DISTRICT IV													
Curry:													
Male	962.8	310.2	166.0	122.5	82.6	23.7	2.8	13.9	36.9	25.9	29.3	17.6	9.2
Female	795.9	216.3	178.5	53.2	91.9	20.9	20.6	3.8	7.8	9.7	29.5	6.6	1.8
De Baca:													
Male	1019.0	957.1	76.1	98.6	81.9	19.6	—	—	—	59.7	—	—	—
Female	693.9	308.2	79.9	16.6	59.6	98.9	—	21.8	—	—	—	—	—
Guadalupe:													
Male	1011.8	302.0	122.3	216.3	50.5	32.6	26.3	99.8	—	70.5	—	35.0	—
Female	983.0	390.8	118.5	19.3	59.5	41.0	59.5	—	19.7	—	—	19.9	—
Harding:													
Male	936.2	239.0	75.2	185.7	73.0	—	—	19.0	—	75.0	—	—	—
Female	1018.1	296.7	161.6	116.3	100.3	50.1	59.9	—	—	—	—	—	—
Quay:													
Male	1048.3	996.9	198.8	109.9	91.7	21.5	9.3	20.7	8.1	59.1	13.3	29.0	51.8
Female	863.2	296.6	119.6	96.7	58.9	25.9	22.3	9.2	5.3	6.2	9.9	—	9.6
Roosevelt:													
Male	895.2	272.9	178.8	108.0	95.0	27.2	3.9	5.2	18.6	95.9	10.5	—	—
Female	841.1	277.0	160.9	66.9	116.0	38.9	27.7	—	9.0	9.7	5.3	—	—
Union:													
Male	992.0	289.9	198.8	152.0	35.0	98.1	—	15.5	17.9	23.7	7.9	—	—
Female	999.2	301.2	175.8	83.9	57.5	69.9	95.2	—	10.9	21.1	9.6	—	—
DISTRICT V													
Catron:													
Male	1142.7	428.0	231.9	122.8	99.2	51.6	31.0	21.9	—	—	—	92.6	—
Female	1058.9	280.9	73.8	226.9	199.5	31.8	—	—	—	—	—	95.8	—
Grant:													
Male	1060.0	261.0	206.3	122.9	76.1	38.0	30.9	13.1	6.5	29.0	6.9	16.9	38.2
Female	839.3	227.7	162.7	92.5	119.1	39.6	19.9	17.5	6.7	6.1	23.9	3.6	6.1
Hidalgo:													
Male	1381.9	257.7	219.8	299.3	60.6	71.1	26.6	13.7	98.9	—	12.2	19.9	19.9
Female	962.9	239.5	198.9	91.2	192.2	38.9	19.6	—	—	—	19.9	16.6	—
Lunar:													
Male	1391.9	997.8	205.1	119.0	117.2	16.3	28.1	16.1	35.5	30.3	7.3	12.3	8.2
Female	859.5	276.0	192.6	91.9	68.6	29.9	17.3	3.8	15.2	7.8	9.9	3.7	—
DISTRICT VI													
Chaves:													
Male	1273.5	295.5	278.1	122.0	77.6	90.2	21.0	28.1	93.6	39.8	19.9	37.2	11.2
Female	996.9	209.7	169.9	91.8	98.5	36.3	35.8	19.3	13.3	2.9	18.9	10.6	13.5
Eddy:													
Male	1162.1	323.3	293.9	132.1	66.2	39.2	19.5	19.2	19.5	19.1	7.7	26.2	9.0
Female	1029.1	289.9	195.2	58.9	130.9	96.6	35.9	6.8	8.2	5.3	25.7	3.8	—
Lea:													
Male	1297.7	909.9	233.6	117.5	75.6	28.8	27.8	11.5	38.9	22.5	98.8	20.5	29.8
Female	978.6	298.2	193.9	38.1	128.9	16.6	19.8	12.6	8.9	10.6	92.9	8.9	12.1
Lincoln:													
Male	938.7	181.6	135.8	152.9	99.2	29.3	—	25.7	27.5	76.6	5.3	98.2	17.1
Female	888.6	228.7	195.7	91.9	93.1	13.7	8.9	8.9	—	19.8	—	6.5	5.3
Otero:													
Male	1183.9	372.5	268.9	116.8	81.9	98.5	18.1	35.9	28.7	28.6	15.8	19.1	22.8
Female	1083.1	318.3	181.8	95.6	98.5	30.7	28.3	28.7	9.5	2.9	18.1	5.5	—
DISTRICT VII													
Dona Ana:													
Male	1066.8	293.8	219.3	99.2	68.9	92.3	39.7	15.5	25.2	27.8	18.8	18.8	21.5
Female	898.9	298.1	183.7	29.8	87.7	29.8	35.3	8.9	9.1	9.1	29.8	6.9	5.6
Sierra:													
Male	1183.8	278.9	151.9	112.9	96.8	29.1	9.9	57.3	98.8	28.9	6.7	29.9	11.8
Female	868.1	388.6	188.1	91.9	98.9	83.6	27.2	19.1	19.9	8.9	9.7	—	—
Socorro:													
Male	1992.6	377.9	238.9	178.6	73.8	35.8	17.5	27.1	28.6	29.5	9.8	18.3	36.2
Female	1390.1	268.5	378.9	75.8	158.8	68.3	8.7	—	—	7.6	—	18.1	—

Rates Per 100,000 Population

TABLE 3.17
AGE-SPECIFIC DEATH RATES FOR SELECTED CAUSES · MALES

New Mexico Residents 1977-79 Average
United States 1978

MALE (By Age Group)	ALL CAUSES	DISEASES OF HEART 390-398, 402, 404-429	MALIGNANT NEOPLASMS 140-209	STROKE 430-438	ACCIDENTS			PNEUMONIA & INFLUENZA 470-474, 480-486	DIABETES MELLITUS 250	CIRRHOSIS OF LIVER 571	ARTERIOSCLEROSIS 440	SUICIDE E950-E959	BRONCHITIS, EMPHYSEMA, ASTHMA 490-493	HOMICIDE E960-E978	ALCOHOLISM 303
					TOTAL E800-E949	Motor Vehicle E810-E823	All Other E800-E807 E825-E949								
UNITED STATES															
1 - 4	78.2	2.2	5.5	1.0	33.6	11.6	21.9	2.9	0.1	0.1	—	—	0.5	2.8	0.0
5 - 14	41.4	1.0	4.8	0.6	23.2	11.2	11.9	0.9	0.1	0.1	—	0.7	0.2	1.4	0.0
15 - 24	173.5	3.2	7.7	1.2	100.5	70.5	30.1	1.6	0.3	0.3	0.0	20.0	0.3	20.4	0.5
25 - 34	192.6	11.6	14.0	2.6	74.3	45.3	29.0	2.7	1.4	4.8	0.0	25.5	0.4	27.7	1.6
35 - 44	313.8	73.3	45.1	10.2	61.6	31.3	30.4	5.5	4.4	14.7	0.3	21.4	1.1	23.1	5.7
45 - 54	747.3	248.0	192.2	28.6	60.4	26.7	33.6	13.1	10.6	43.2	1.3	23.4	5.4	16.5	10.3
55 - 64	1406.3	741.3	522.0	85.3	68.7	27.0	41.7	33.1	27.2	61.5	6.5	27.5	27.3	11.2	12.3
65 - 74	2185.4	1761.6	1076.7	290.0	86.4	30.8	56.1	96.1	64.4	63.7	30.4	33.1	86.6	8.0	9.4
75 - 84	3385.3	3069.1	1844.4	984.5	176.1	49.4	126.2	371.1	137.6	47.6	161.4	47.6	179.1	6.3	4.5
85 +	17258.4	7990.6	2137.2	2244.2	356.1	50.6	305.5	1098.7	199.4	24.7	653.3	48.3	181.4	6.5	2.0
NEW MEXICO (ALL RACES)															
1 - 4	95.6	2.4	2.4	—	44.2	24.2	25.0	3.6	—	—	—	—	2.1	4.3	—
5 - 14	35.8	0.5	4.7	0.2	19.6	10.1	9.5	0.7	—	—	—	0.7	—	1.4	—
15 - 24	315.4	3.0	8.6	0.6	198.1	153.6	44.5	1.2	—	0.3	—	44.2	—	30.8	4.4
25 - 34	408.8	8.2	18.7	3.6	185.2	127.4	57.8	3.6	3.6	13.2	—	60.5	1.4	50.5	21.8
35 - 44	348.3	40.1	28.4	8.8	104.1	68.0	41.1	4.4	5.4	33.3	0.5	34.7	0.5	36.2	41.6
45 - 54	740.4	160.4	132.6	22.3	125.3	66.4	58.5	7.8	14.5	96.8	2.2	27.3	5.6	23.4	55.2
55 - 64	1842.4	541.4	444.4	62.4	125.6	72.2	53.4	30.1	50.4	55.6	3.0	38.4	36.1	14.6	76.0
65 - 74	4450.5	1395.1	1102.0	257.3	163.1	79.6	83.5	44.2	87.5	70.3	34.5	46.4	136.6	14.6	61.0
75 - 84	8470.4	2634.2	1662.4	784.8	214.5	78.2	141.3	357.8	180.4	48.1	153.4	57.1	213.5	4.0	21.0
85 +	20571.4	6488.8	2381.0	2585.0	816.3	176.4	639.5	2054.4	217.7	54.4	571.4	122.4	244.4	40.8	27.2
NEW MEXICO NON-HISPANIC WHITE															
1 - 4	81.6	1.6	1.6	—	42.5	13.1	29.4	4.4	—	—	—	—	1.6	—	—
5 - 14	32.3	—	4.6	0.5	18.5	8.2	10.3	—	—	—	—	1.0	—	1.0	—
15 - 24	277.6	3.7	10.3	—	177.1	137.0	40.2	—	—	—	—	44.4	—	21.3	2.4
25 - 34	321.7	7.6	23.7	3.4	144.8	44.0	55.4	1.7	5.1	5.4	—	61.8	2.5	28.8	5.1
35 - 44	245.8	44.5	30.2	8.4	80.7	48.7	31.4	3.4	7.6	11.8	0.8	29.4	0.8	22.7	18.5
45 - 54	643.3	183.7	157.6	20.7	45.4	45.4	44.5	5.4	4.4	27.4	3.6	33.3	6.3	13.5	35.1
55 - 64	2155.7	676.0	586.0	76.6	115.5	57.1	58.4	29.2	43.8	46.2	3.6	51.1	53.5	17.0	45.0
65 - 74	5227.0	1704.3	1380.1	271.6	131.4	57.0	74.5	46.4	63.5	81.1	41.6	59.1	203.7	11.0	59.1
75 - 84	9662.8	3147.8	1925.6	927.4	224.5	84.8	139.7	404.1	134.7	24.4	184.6	24.8	284.3	10.0	10.0
85 +	23454.3	8209.4	2676.0	2487.8	883.3	155.4	727.5	2234.3	207.8	52.0	774.4	181.4	467.7	26.0	26.0
NEW MEXICO HISPANIC WHITE															
1 - 4	84.8	3.3	5.0	—	34.4	20.0	20.0	3.3	—	—	—	—	1.7	4.3	—
5 - 14	32.4	1.0	4.6	—	17.0	11.8	5.1	1.5	—	—	—	—	—	1.5	—
15 - 24	242.1	0.7	7.3	0.7	183.0	144.0	38.1	0.7	0.7	—	—	43.2	—	35.4	2.2
25 - 34	421.2	6.3	12.6	5.1	185.7	139.0	46.7	6.3	2.5	12.6	—	61.4	—	64.5	17.7
35 - 44	437.8	27.7	21.4	10.2	124.0	78.8	45.2	2.4	1.5	58.4	—	35.0	—	52.5	45.2
45 - 54	722.7	121.0	84.0	26.7	131.7	78.3	53.4	8.4	24.4	81.4	—	16.0	3.6	24.4	73.0
55 - 64	1204.4	324.4	208.4	33.2	111.3	80.5	30.8	28.4	66.3	66.3	2.4	14.2	4.5	11.8	104.2
65 - 74	3334.6	946.4	647.8	245.1	186.4	45.5	41.4	41.4	116.3	62.3	24.1	24.1	33.2	20.8	58.2
75 - 84	7441.5	2757.6	1558.0	644.5	212.0	53.0	159.0	334.2	328.6	106.0	148.4	31.8	127.2	10.6	53.0
85 +	12300.7	3645.3	1518.6	1619.8	480.4	177.2	303.7	1366.7	151.4	25.3	253.1	50.6	—	25.3	—
NEW MEXICO BLACK															
1 - 4	44.3	—	—	—	33.1	33.1	—	—	—	—	—	—	33.1	—	—
5 - 14	62.4	—	10.5	—	52.4	21.0	31.5	—	—	—	—	—	—	—	—
15 - 24	74.0	13.2	13.2	—	13.2	13.2	—	—	—	—	—	—	—	26.3	—
25 - 34	146.1	26.6	—	—	53.2	53.2	—	—	—	—	—	26.6	—	186.4	—
35 - 44	372.6	44.7	24.8	24.8	24.8	—	24.8	—	—	24.8	—	24.8	—	74.5	24.8
45 - 54	800.4	140.7	114.4	—	114.4	76.3	38.1	38.1	—	—	—	—	—	76.3	38.1
55 - 64	2787.3	734.5	625.7	170.6	170.6	56.4	113.8	113.8	113.8	—	—	—	—	113.8	284.4
65 - 74	3453.5	1126.1	900.4	300.3	75.1	—	75.1	75.1	150.2	—	—	75.1	75.1	—	75.1
75 - 84	8123.2	3081.2	1960.8	1120.4	—	—	—	280.1	—	—	280.1	—	560.2	—	—
85 +	12000.0	2666.7	—	1333.3	1333.3	—	1333.3	—	—	—	1333.3	—	—	—	—
NEW MEXICO INDIAN															
1 - 4	172.0	6.6	—	—	119.1	86.0	33.1	—	—	—	—	—	—	6.6	—
5 - 14	62.8	—	4.8	—	31.4	4.7	21.7	—	—	—	—	2.4	—	2.4	—
15 - 24	284.3	7.8	—	3.4	486.3	360.8	125.5	11.8	—	—	—	129.4	—	70.6	31.4
25 - 34	1058.4	14.1	14.1	—	510.1	357.1	153.0	6.4	—	76.5	—	63.8	—	95.6	172.1
35 - 44	1257.1	68.4	54.4	—	360.6	230.4	119.7	25.7	8.6	111.2	—	44.1	—	68.4	265.1
45 - 54	1550.1	128.2	116.6	23.3	489.5	268.1	221.4	23.3	11.7	81.6	—	35.0	11.7	128.2	209.8
55 - 64	1900.7	223.6	159.7	42.4	351.4	207.6	143.7	31.4	16.0	127.8	—	42.9	—	24.4	239.6
65 - 74	2408.1	439.4	513.2	171.1	415.4	268.8	146.6	42.8	171.1	24.4	—	—	24.4	24.4	42.8
75 - 84	5060.0	1095.5	671.8	313.0	365.2	156.5	208.7	260.8	52.2	52.2	—	—	52.2	—	—
85 +	10140.2	1902.4	1294.5	863.0	647.2	—	647.2	1078.7	215.7	—	107.4	—	—	107.4	107.4

New Mexico Rates by Race/Ethnic based on the 1978 population estimates supplied by New Mexico Tumor Registry.

0.0 Equals less than one-tenth of one percent.

TABLE 3.18
AGE-SPECIFIC DEATH RATES FOR SELECTED CAUSES - FEMALES

New Mexico Residents 1977-79 Average
United States 1978

FEMALE (By Age Group)	ALL CAUSES	DISEASES OF HEART 390-398, 402, 404 410-429	MALIGNANT NEOPLASMS 140-209	STROKE 430-438	ACCIDENTS			INFLUENZA & PNEUMONIA 470-474, 480-486	DIABETES MELLITUS 250	CIRRHOSIS OF LIVER 571	ARTERIOCLEROSIS 440	SUICIDE E950-E959	BRONCHITIS, EMPHYSEMA, ASTHMA 490-493	HOMICIDE E960-E978	ALCOHOLISM 303
					TOTAL E800-E949	Motor Vehicle E810-E823	All Other E800-E807 E825-E949								
UNITED STATES															
1 - 4	59.9	2.4	4.3	0.6	23.8	9.4	14.3	2.9	0.1	0.2	—	—	0.3	2.4	—
5 - 14	26.1	1.0	3.6	0.5	11.1	6.3	4.8	0.8	0.1	0.0	—	0.2	0.1	1.2	—
15 - 24	60.9	2.1	4.9	1.1	28.0	22.1	5.9	1.1	0.4	0.3	—	4.7	0.3	5.9	0.1
25 - 34	79.7	5.0	14.3	2.7	18.1	12.1	6.1	1.7	1.4	2.3	0.0	8.1	0.4	6.4	0.4
35 - 44	167.8	21.4	53.9	9.4	17.5	9.8	7.7	3.3	3.2	9.3	0.1	10.1	1.1	5.4	1.8
45 - 54	433.2	85.2	177.1	26.2	20.0	9.7	10.3	7.0	8.7	21.8	0.6	11.2	4.2	3.7	3.1
55 - 64	976.3	279.7	369.7	69.1	26.5	11.4	15.1	15.8	26.6	27.3	3.3	9.7	12.9	2.7	2.5
65 - 74	2137.6	823.1	588.7	207.9	40.6	14.4	26.2	42.5	69.5	29.6	19.2	7.9	29.1	2.7	1.8
75 - 84	5863.1	2665.6	958.8	865.5	101.3	19.9	81.4	196.3	150.4	20.7	133.1	7.4	37.6	3.7	0.6
85 +	13541.2	6673.5	1139.3	2298.5	240.9	12.0	228.9	722.5	217.5	12.7	631.6	5.1	47.8	3.5	0.9
NEW MEXICO (ALL RACES)															
1 - 4	63.0	0.7	1.4	—	32.6	16.7	15.9	3.6	0.2	—	—	—	0.2	3.6	—
5 - 14	22.0	0.5	1.4	0.2	12.3	9.2	3.0	0.5	0.5	—	—	0.5	—	1.4	—
15 - 24	83.4	2.0	6.1	1.5	43.2	37.9	5.3	1.5	0.9	0.3	—	7.5	0.3	6.7	0.9
25 - 34	124.8	3.0	12.4	2.6	42.6	32.4	10.2	1.7	2.6	2.1	—	10.7	0.4	13.6	5.1
35 - 44	174.8	9.7	41.2	7.9	31.0	21.3	9.7	3.2	3.2	6.9	—	17.1	1.4	6.9	8.3
45 - 54	397.5	38.7	147.5	19.9	29.7	20.2	9.6	9.0	11.7	18.0	—	12.7	2.7	9.0	17.0
55 - 64	951.7	202.8	320.4	57.0	46.2	25.3	20.9	15.2	27.4	23.8	3.6	13.0	15.9	6.5	18.0
65 - 74	2411.6	639.8	727.1	205.0	66.6	26.9	39.7	64.3	102.9	25.7	19.9	8.2	38.6	3.5	12.9
75 - 84	6006.4	1923.2	1116.9	885.2	150.4	29.6	120.8	268.8	221.9	44.4	108.5	2.5	44.4	4.9	9.9
85 +	18120.9	6209.0	1898.0	2625.1	708.2	18.9	689.3	1265.3	302.2	18.9	746.0	—	47.2	28.3	9.4
NEW MEXICO NON-HISPANIC WHITE															
1 - 4	55.5	1.7	1.7	—	25.2	10.1	15.1	3.4	—	—	—	—	1.7	5.0	—
5 - 14	21.3	1.1	2.1	0.5	11.2	9.1	2.1	—	—	—	—	0.5	—	2.1	—
15 - 24	83.7	1.9	5.6	1.2	44.0	37.8	6.2	1.2	0.6	—	—	8.1	0.6	7.4	—
25 - 34	129.5	1.7	15.4	1.7	45.1	32.6	12.5	2.5	3.3	—	—	15.9	0.8	12.5	2.5
35 - 44	182.0	10.7	50.2	9.9	28.8	18.9	9.9	4.1	4.1	4.9	—	21.4	2.5	5.8	4.9
45 - 54	416.4	43.7	169.6	15.4	30.0	18.0	12.0	7.7	8.6	17.1	—	17.1	4.3	7.7	12.0
55 - 64	1040.1	219.3	369.9	56.2	45.0	21.4	23.6	16.9	19.1	21.4	3.4	16.9	22.5	9.0	18.0
65 - 74	2555.8	699.8	805.6	216.4	75.6	29.9	45.7	56.3	73.9	26.4	17.6	10.6	52.8	5.3	8.8
75 - 84	6636.8	2268.3	1244.4	960.4	164.4	33.6	130.8	269.1	209.3	37.4	199.5	3.7	59.8	7.5	11.2
85 +	18937.9	6712.5	1738.8	2951.9	781.8	13.5	768.3	1091.8	256.1	27.0	993.5	—	90.4	—	13.5
NEW MEXICO HISPANIC WHITE															
1 - 4	56.3	—	1.7	—	34.1	20.5	13.7	1.7	—	—	—	—	—	1.7	—
5 - 14	18.4	—	1.1	—	10.5	7.4	3.2	0.5	1.1	—	—	0.5	—	1.1	—
15 - 24	66.9	2.1	6.3	1.4	32.1	29.3	2.8	1.4	0.7	0.7	—	6.3	—	6.3	—
25 - 34	91.8	3.4	5.6	4.5	28.0	23.5	4.5	1.1	1.1	3.2	—	4.5	—	11.2	3.4
35 - 44	124.6	6.8	28.4	4.1	20.3	12.2	8.1	1.4	2.7	2.7	—	13.5	—	8.1	8.1
45 - 54	301.4	27.0	116.4	11.8	15.2	13.5	1.7	6.7	13.5	11.8	—	5.1	—	8.4	18.6
55 - 64	717.7	157.3	238.3	45.3	33.4	23.8	9.5	11.9	35.7	21.4	2.4	7.1	4.8	2.4	19.1
65 - 74	2045.8	508.3	583.4	176.4	37.8	21.0	16.8	88.2	176.4	25.2	16.8	4.2	12.6	4.2	—
75 - 84	5128.2	1929.6	931.6	793.4	129.1	18.4	110.7	285.9	276.7	64.6	36.9	—	18.4	—	9.2
85 +	13657.6	4646.1	1933.3	1777.4	436.5	—	436.5	1309.6	393.0	—	299.5	—	31.2	31.2	—
NEW MEXICO BLACK															
1 - 4	85.8	—	—	—	28.6	—	28.6	—	—	—	—	—	—	—	—
5 - 14	21.7	—	—	—	21.7	—	21.7	—	—	—	—	—	—	—	—
15 - 24	76.9	—	—	—	15.4	15.4	—	—	—	—	—	—	—	—	—
25 - 34	144.3	—	—	—	48.1	—	48.1	—	—	—	—	—	—	24.1	—
35 - 44	233.1	25.9	77.7	—	—	—	—	—	—	—	—	—	—	25.9	25.9
45 - 54	623.8	39.0	155.9	39.0	—	—	—	39.0	—	—	—	—	—	78.0	—
55 - 64	1172.8	451.1	180.4	90.2	180.4	135.3	45.1	45.1	45.1	—	45.1	—	—	—	45.1
65 - 74	3324.8	852.5	1193.5	426.3	—	—	—	85.3	—	—	170.5	—	—	—	—
75 - 84	5389.6	2569.1	769.2	1025.6	—	—	—	—	—	—	—	—	—	—	—
85 +	8888.9	2222.2	2963.0	—	—	—	—	—	740.7	—	740.7	—	—	—	—
NEW MEXICO INDIAN															
1 - 4	113.2	—	—	—	56.6	31.5	25.2	12.6	6.3	—	—	—	—	6.3	—
5 - 14	41.3	—	—	—	25.2	20.6	4.6	2.3	—	—	—	—	—	—	—
15 - 24	175.6	3.5	10.5	3.5	105.4	91.3	14.0	3.5	3.5	—	—	14.0	—	7.0	10.5
25 - 34	271.4	10.9	16.3	—	103.1	86.8	16.3	—	5.4	16.3	—	10.9	—	32.6	32.6
35 - 44	401.9	21.5	28.7	14.4	139.2	100.5	28.7	7.2	—	50.2	—	7.2	—	7.2	43.1
45 - 54	766.4	47.2	82.5	23.6	129.7	94.3	35.4	35.4	47.2	82.5	—	—	—	—	82.5
55 - 64	911.4	130.1	151.9	110.5	82.9	41.4	41.4	—	69.0	69.0	—	—	—	—	—
65 - 74	2339.7	450.1	309.4	168.8	140.6	28.1	112.5	28.1	112.5	28.1	28.1	—	—	—	168.8
75 - 84	5167.0	509.1	995.2	756.1	189.0	63.0	126.0	378.1	252.0	63.0	—	—	—	—	—
85 +	9813.1	939.6	939.6	311.5	467.3	155.8	311.5	1713.4	155.8	155.8	—	—	155.8	155.8	—

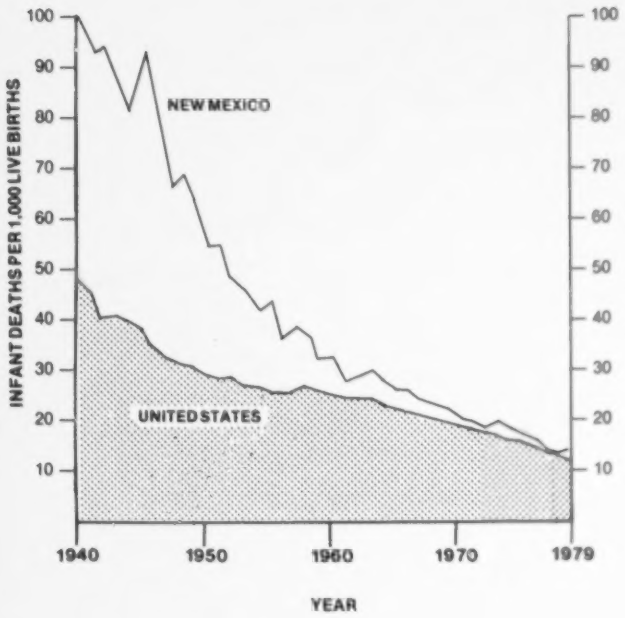
New Mexico by Race/Ethnic based on 1978 population estimates supplied by New Mexico Tumor Registry.

0.0 Equals less than one-tenth of one percent.

INFANT MORTALITY

As seen in Figure 3.6, the infant mortality rate in New Mexico has dropped appreciably since 1940 when it was over twice the national rate and ranked highest among the states.

FIGURE 3.6
INFANT MORTALITY RATE, NEW MEXICO RESIDENTS AND UNITED STATES
1940–1979



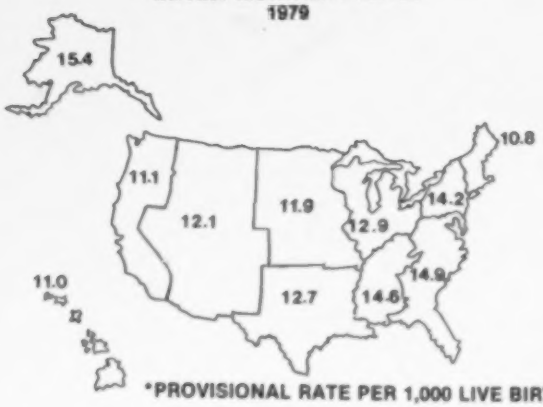
By 1978, New Mexico's rate had dropped to 13.8 infant deaths per 1,000 live births—the lowest rate ever recorded in New Mexico. In 1979, the State's rate increased (the first increase since 1973) to 14.2 infant deaths per thousand live births resulting in a 9% higher infant mortality in New Mexico than nationally.

The infant mortality rate nationally during 1979 was 13.0 infant deaths per thousand live births. This is the lowest infant mortality rate ever recorded nationally as the states ranged from 17.8 in Mississippi to 7.7 in Vermont.

In the Mountain region only Arizona recorded a higher infant mortality rate than did New Mexico. Though four of the Mountain states registered increased rates in 1979, the overall rate for the region did decrease, as it did in all regions except the Middle Atlantic. The Mountain division had one of the lower rates in the country. Lowest was the New England region (Figure 3.7).

The increase in the State infant mortality rate in 1979 resulted from increased rates for the non-Hispanic White (5% increase) and for the Indian (45% increase)—notably for the Navajo. The rate decreased for the Hispanic population and a very notable decrease is noted in the rate for the State's Black population in Table 3.20.

FIGURE 3.7
UNITED STATES BY REGION
INFANT MORTALITY RATES
1979



*PROVISIONAL RATE PER 1,000 LIVE BIRTHS

Since 1976, the infant mortality rate for the State's White population has been lower for the Hispanic component of that population. In 1979, the rate for the non-Hispanic White population was 40% higher than for the Hispanic.

TABLE 3.20
NEW MEXICO RESIDENTS
INFANT MORTALITY RATE BY ETHNIC/RACE
1969-1979

(Rates Per 1,000 Live Births)

NEW MEXICO	1969	1970	1971	1972	1973	1974	1975	1976	1977	1978	1979
ALL RACES	23.6	21.0	20.7	19.9	20.2	18.3	16.9	15.6	14.9	13.8	14.2
White:											
Non-Hispanic	20.2	19.3	18.1	18.5	20.9	20.7	15.9	16.5	15.5	14.9	15.1
Hispanic	21.8	20.1	19.9	17.7	17.8	16.9	16.7	14.1	12.1	12.8	11.7
Blacks	39.0	40.7	29.6	13.2	38.3	33.0	34.5	20.0	29.7	25.1	13.2
Indians	41.2	27.3	34.0	29.6	25.0	20.5	19.1	18.2	17.3	14.1	20.5
Pueblo	22.7	20.0	29.7	29.1	18.1	15.7	14.6	17.9	27.9	19.2	11.9
Navajo	51.1	30.3	39.9	32.1	28.2	25.3	22.8	19.9	18.1	14.8	26.1
Apache	19.9	37.9	25.6	41.0	17.7	16.7	16.1	22.0	10.9	8.1	0.0
All Other Non-White	11.5	9.9	8.7	7.5	6.5	16.1	13.9	9.6	9.5	9.7	5.6

Rates Per 1,000 Live Births

Table 3.21 on the following page lists infant death rates by cause for the United States in 1978. New Mexico data is presented for individual years 1978 and 1977, and also three year averages for 1976-78 and 1972-74. Because of a revision in the cause of death classification 1979 data would not be directly compatable with data of earlier years, and is therefore not presented in this table. 1979 data is available in Table 3.24.

Comparing New Mexico data for the three year average 1976-78 to U.S. data reveals higher mortality rate in New Mexico for diarrheal disease, meningitis, influenza/pneumonia, immaturity, homicide, and "symptoms and ill-defined conditions", a category which includes sudden infant deaths (SIDS).

In New Mexico, immaturity is the major cause of death in early infancy, accounting for nearly 25% of all infant deaths. Nationally, the percentage is a little under 8%.

The mortality rates presented in Table 3.21 are per 100,000 live births.

TABLE 3.21
INFANT MORTALITY RATES BY CAUSE
NEW MEXICO RESIDENTS 1972-74
AND 1976-78 AVERAGES
AND INDIVIDUAL YEARS 1977 AND 1978
UNITED STATES 1978
(Rates Per 100,000 Live Births)

ICDA	CAUSE OF DEATH, 8TH REVISION INTERNATIONAL CLASSIFICATION OF DISEASES - Adopted 1965	UNITED STATES 1978	NEW MEXICO			
			SINGLE YEAR DATA		3-YEAR AVERAGE	
			1978	1977	1976-78	1972-74
	ALL CAUSES	1378.4	1380.3	1441.6	1459.8	1928.4
009	Diarrheal Diseases	21.2	29.3	30.3	30.4	47.6
038	Septicemia	32.8	20.9	21.6	23.1	25.4
320	Meningitis	16.0	16.7	39.0	37.6	27.0
470-479 480-486	Influenza and Pneumonia	46.0	46.0	56.3	63.6	142.8
740-759	Congenital Anomalies	252.1	301.2	212.1	252.9	341.2
740	*Anencephalus*	22.8	12.5	17.3	14.5	17.5
741	*Spina Bifida*	8.9	--	4.3	5.8	17.5
742	*Congenital Hydrocephalus*	10.3	25.1	4.3	14.5	14.3
743-744	*Other Congenital Anomalies of Central Nervous System and Eye*	8.6	12.5	13.0	13.0	9.5
746	*Congenital Anomalies of Heart*	84.9	96.2	39.0	63.6	120.6
747	*Other Congenital Anomalies of Circulatory System*	25.4	4.2	13.0	8.7	23.8
748	*Congenital Anomalies of Respiratory System*	21.2	20.9	8.7	15.9	7.9
749-751	*Congenital Anomalies of Digestive System*	8.4	12.5	8.7	10.1	22.2
752-753	*Congenital Anomalies of Genitourinary*	8.7	4.2	8.7	10.1	1.6
754-756	*Congenital Anomalies of Musculoskeletal*	6.4	4.2	4.3	2.9	28.6
759	*Congenital Anomalies affecting multiple sites*	40.8	46.0	64.9	54.9	73.0
Residual of 740-759	*Other and Unspecified Congenital Anomalies*	5.8	62.7	26.0	39.0	4.8
760-769.2 769.4-772 774-778	Certain Causes of Mortality in Early Infancy	659.6	614.9	740.3	696.7	931.7
762	*Toxemia of Pregnancy*	2.4	--	13.0	5.8	3.2
764-768	*Difficult Labor*	8.0	--	--	2.9	19.0
770	*Conditions of Placenta*	23.0	12.5	8.7	17.3	28.6
771	*Conditions of Cord*	5.3	--	8.7	4.3	15.9
772	*Birth Injury without Mention of Cause*	55.5	12.5	--	17.3	41.3
774-775	*Hemolytic Disease of Newborn*	6.4	--	--	2.9	25.4
776.0	*Hyaline Membrane Disease*	80.0	37.6	26.0	41.9	127.0
776.2	*Respiratory Distress Syndrome*	99.7	58.6	112.6	95.4	207.9
776.9	*Asphyxia of Newborn Unspecified*	88.7	41.8	21.6	44.8	131.7
777	*Immaturity, Unqualified*	110.3	363.9	406.9	362.8	168.2
Residual of 760-769.2 769.4-772 774-778	*Residual - Certain Causes of Mortality in Early Infancy*	180.3	87.8	142.9	101.2	179.5
780-796	Symptoms and Ill-Defined Conditions	171.4	246.8	194.8	221.1	163.5
800-E949	Accidents	37.9	37.6	30.3	33.2	74.6
960-E978	Homicide	4.8	4.2	17.3	18.8	11.1
	RESIDUAL ALL CAUSES	136.6	62.7	99.6	82.4	163.5

Per 100,000 Live Births

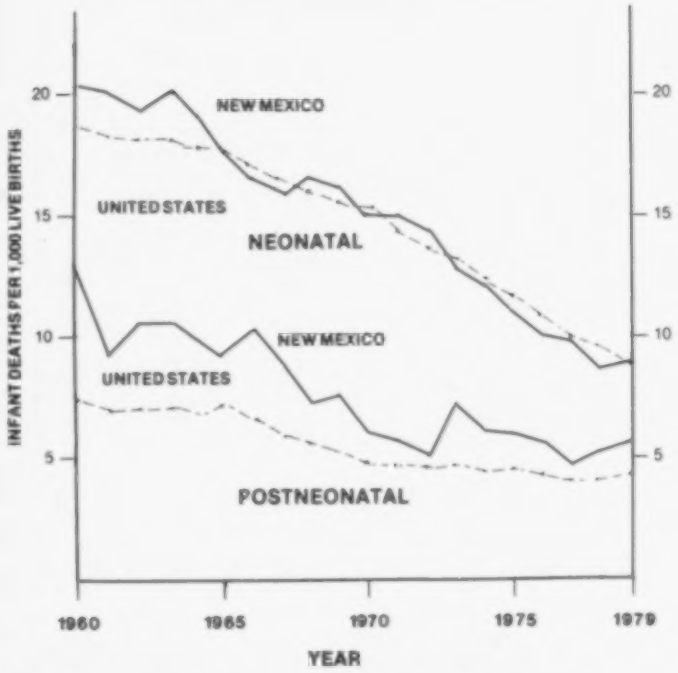
New Mexico's 1978 infant mortality rate exceeded the national rate by 1.5%; in 1979 it was 9% higher.

A breakdown of infant deaths into two components—neonatal *(first 27 days of life)* and postneonatal *(older than 27 days but less than one year of age)*—indicates that while both components of the State's infant mortality increased in 1979, the higher rate of infant deaths in New Mexico as compared with the United States, may be attributed mainly to a greater rate of death in the postneonatal period.

As seen in Figure 3.8, between 1973 and 1978, the State's neonatal mortality rate was below the national level but the increase in rate for 1979 placed the New Mexico rate 1% higher than nationally—8.8 infant deaths as compared with 8.7, nationally.

In the postneonatal period, New Mexico's mortality rate has over the years consistently exceeded the national rate. In 1978, the State's rate was 21% higher than nationally and in 1979 increased the difference to 29%—5.4 deaths per thousand live births in New Mexico as compared to 4.2, nationally.

FIGURE 3.8
NEONATAL AND POSTNEONATAL MORTALITY RATES
NEW MEXICO RESIDENTS AND UNITED STATES
1960-1979



The State's Indian and non-Hispanic White populations exceeded the national neonatal mortality rate in 1979, while all but the Hispanic population exceeded the national postneonatal mortality rate (Figure 3.9).

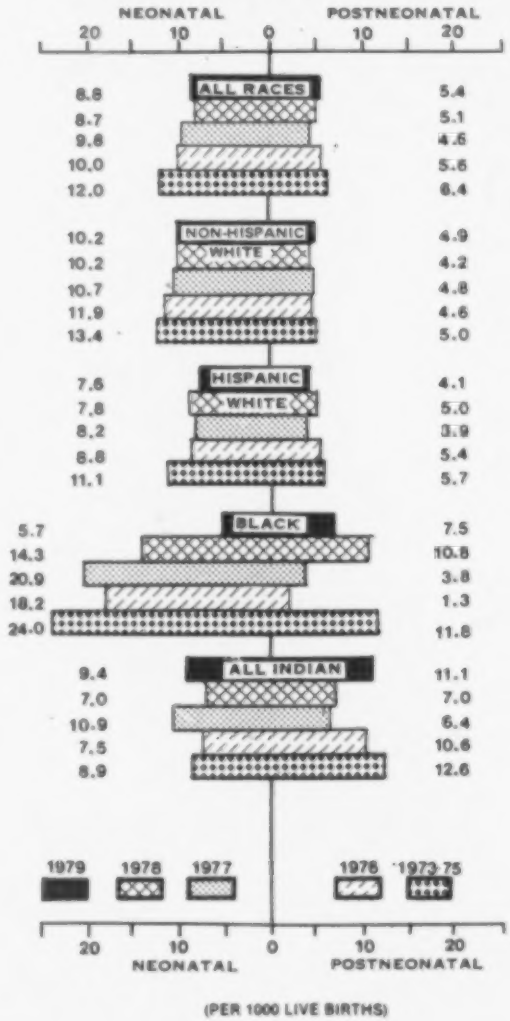
Figure 3.9 graphically illustrates the trends and levels of infant mortality in New Mexico in recent years.

The lowest neonatal mortality rate in 1979 is the rate recorded for New Mexico's Black population which dropped notably in 1979. The neonatal rate also decreased for the Hispanic while remaining unchanged for the non-Hispanic White population. The Indian registered the highest increase in neonatal mortality in 1979.

The postneonatal mortality rate was highest for the Indian (over twice the national rate). The rate increased in 1979 for the Indian and non-Hispanic White and decreased for the Black and the Hispanic.

In 1979 then, New Mexico's neonatal mortality rate increased because of an increase in rate for the Indian, while the post neonatal mortality rate increased because of increases for the Indian and non-Hispanic White populations. The end result being a 3% increase in the State's infant mortality rate.

FIGURE 3.9
NEONATAL AND POSTNEONATAL DEATH RATES
BY ETHNIC/RACE, NEW MEXICO RESIDENTS
1979, 1978, 1977, 1976 & 1973-75 AVERAGE



As was the case in the prior two years, infant mortality rates were higher for males than for females in New Mexico during 1979. The rate decreased over the previous year's rate for males and increased for females. Indians recorded the highest male infant mortality rate. The infant mortality rate for females was highest for non-hispanic White females.

Mortality rates were highest among non-Hispanic Whites for female infants, in the neonatal period and highest among Indian females in the postneonatal period. For males, Indians were highest in both neonatal and postneonatal mortality rates (Table 3.22).

TABLE 3.22
NEW MEXICO RESIDENTS, 1979
INFANT MORTALITY RATE
BY ETHNIC/RACE AND SEX
(Rates Per 1,000 Live Births)

ETHNIC/RACE	MALE	FEMALE	TOTAL
ALL RACES:			
Infant Deaths	15.7	12.6	14.2
Neonatal Deaths	9.5	8.1	8.8
Postneonatal Deaths	6.2	4.5	5.4
NON-HISPANIC WHITE:			
Infant Deaths	16.1	14.1	15.1
Neonatal Deaths	11.2	9.1	10.2
Postneonatal Deaths	4.9	5.0	4.9
HISPANIC WHITE:			
Infant Deaths	11.9	11.5	11.7
Neonatal Deaths	7.3	7.9	7.6
Postneonatal Deaths	4.6	3.6	4.1
INDIAN:			
Infant Deaths	27.6	13.4	20.5
Neonatal Deaths	12.1	6.7	9.4
Postneonatal Deaths	15.5	6.7	11.1
BLACK:			
Infant Deaths	20.2	7.1	13.2
Neonatal Deaths	8.1	3.5	5.7
Postneonatal Deaths	12.1	3.5	7.5

Infant mortality by neonatal and postneonatal components by county for 1979 are presented in Table 3.28 on page 56. Comparison of 1979 figures with those of 1978 reveal an increase of 2 1/2 times as many infant deaths in McKinley County in 1979.

McKinley County is composed of a large Indian population and as noted earlier an increase in Indian infant mortality did occur in 1979, therefore the increase in the county rate would be expected. The increase in the New Mexico infant mortality rate in 1979 resulted from an increased rate in McKinley County.

A five year average infant mortality rate by county is presented in Table 3.23. Neonatal mortality rates are higher than postneonatal mortality rates in all but four of the counties. The highest postneonatal mortality was recorded in McKinley County.

TABLE 3.23
INFANT MORTALITY
NUMBER AND RATES BY COUNTY
NEW MEXICO RESIDENTS 1975-79 AVERAGE

HEALTH DISTRICTS	COUNTY	TOTAL INF. DEATHS		NEONATAL		POSTNEONATAL	
		Number	Rate	Number	Rate	Number	Rate
	NEW MEXICO	1719	14.9	1108	9.6	611	5.3
1	MCKINLEY	143	18.2	64	8.1	79	10.0
1	SAN JUAN	120	13.4	69	7.7	51	5.7
2	COLFAX	17	16.3	14	13.5	3	2.9
2	LOS ALAMOS	12	13.0	8	8.7	4	4.3
2	MORA	4	12.0	2	6.0	2	6.0
2	RIO ARRIBA	50	15.9	29	9.2	21	6.7
2	SAN MIGUEL	40	18.2	22	10.0	18	8.2
2	SANTA FE	64	11.2	40	7.0	24	4.2
2	TAOS	30	16.4	21	11.5	9	4.9
3	BERNALILLO	388	12.0	253	7.9	135	4.2
3	SANDOVAL	35	13.0	17	6.3	18	6.7
3	TORRANCE	8	15.5	6	11.6	2	3.9
3	VALENCIA	99	16.9	60	10.2	39	6.7
4	CURRY	78	16.0	56	11.5	22	4.5
4	DE BACA	1	6.1	1	6.1	--	--
4	GUADALUPE	9	23.4	6	15.6	3	7.8
4	HARDING	4	60.6	4	60.6	--	--
4	QUAY	15	17.8	12	14.3	3	3.6
4	ROOSEVELT	19	14.3	9	6.8	10	7.5
4	UNION	9	25.8	6	17.2	3	8.6
5	CATRON	10	46.9	8	37.6	2	9.4
5	GRANT	37	14.5	32	12.6	5	2.0
5	HIDALGO	13	18.2	8	11.2	5	7.0
5	LUNA	33	23.5	24	17.1	9	6.4
6	CHAVES	66	16.2	43	10.6	23	5.7
6	EDDY	69	15.3	47	11.2	17	4.1
6	LEA	120	22.4	76	14.2	44	8.2
6	LINCOLN	10	12.4	7	8.7	3	3.7
6	OTERO	76	15.6	55	11.3	21	4.3
7	DONA ANA	110	13.7	80	10.0	30	3.7
7	SIERRA	9	19.1	7	14.9	2	4.2
7	SOCORRO	26	22.1	22	18.7	4	3.4

Rates Per 1,000 Live Births

Analysis of 1979 New Mexico infant mortality by cause is presented in Table 3.24 on the following page. Because of the revision in the cause of death classifications the data is not directly comparable with that of earlier years. 1979 national data was not yet available at publishing for comparison.

As noted from Table 3.24, in 1979, 38% of infant deaths occur in the postneonatal period. In the neonatal period, 31% of all infant deaths occur at less than one day of age, 24% are 1-6 days, and 7% occur at 7-27 days of age.

Low birth weight/short gestation accounts for 61% of deaths of infants under one day of age. For infants one to six days, low birth weight/short gestation is also the leading cause of death (Table 3.24).

Congenital anomalies are the leading cause of death of infants in the 7-27 days of age bracket accounting for 24% of these deaths.

Sudden infant death is the leading cause of post-neonatal deaths. Congenital anomalies are the second leading cause of death in this age group.

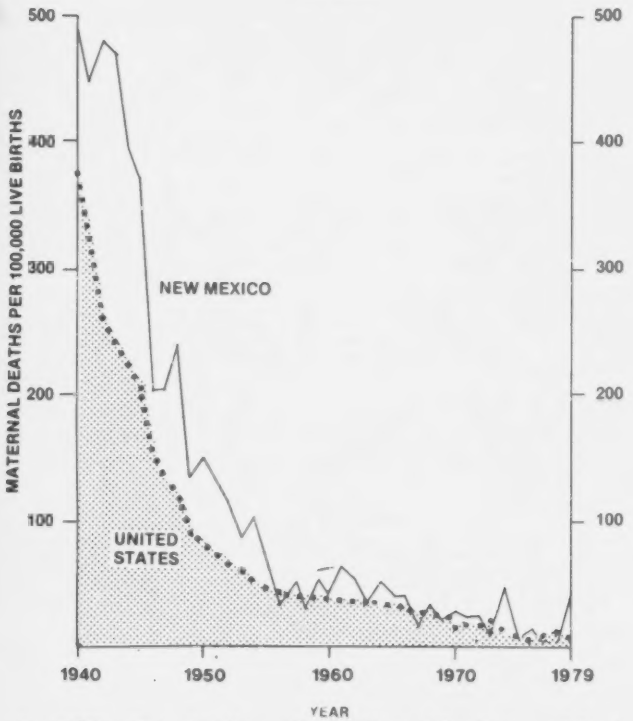
TABLE 3.24
INFANT MORTALITY RATES BY CAUSE/AGE
NEW MEXICO RESIDENTS-1979
(Rates per 1,000 Live Births)

ICDA	CAUSE OF DEATH, 9TH REVISION INTERNATIONAL CLASSIFICATION OF DISEASES	NEW MEXICO INFANT DEATH RATES				
		< 1 DAY	1-6 DAYS	7-27 DAYS	28 DAYS <1 YEAR	TOTAL
	ALL CAUSES	447.2	338.4	100.7	535.8	1422.2
036	Meningococcal infection	--	--	--	4.0	4.0
038	Septicemia	--	--	--	8.1	8.1
Residual of 001-139	Other infectious & parasitic diseases	4.0	--	--	24.2	28.2
140-208	Malignant neoplasms	--	--	--	8.1	8.1
320-322	Meningitis	--	--	--	12.1	12.1
323-389	Other diseases of nervous system & sense organs	4.0	--	--	4.0	8.1
480-487	Pneumonia and influenza	--	12.1	--	40.3	52.4
Residual of 460-519	Other diseases of the respiratory system	4.0	--	--	4.0	8.1
520-579	Diseases of the digestive system	4.0	8.1	--	12.1	24.2
740-759	Congenital anomalies	44.3	48.3	40.3	52.4	185.3
740	*Anencephalus and similar anomalies*	4.0	--	--	--	4.0
741	*Spina bifida*	--	4.0	4.0	--	8.1
742.3	*Congenital hydrocephalus*	--	--	--	4.0	4.0
742.0-742.2, 742.4-742.9, & 743	*Other congenital anomalies of central nervous system and eye*	--	4.0	--	4.0	8.1
745-746	*Congenital anomalies of heart*	--	24.2	16.1	24.2	64.5
747	*Other congenital anomalies of circulatory system*	4.0	--	8.1	--	12.1
748	*Congenital anomalies of respiratory system*	8.1	--	--	--	8.1
749-751	*Congenital anomalies of digestive system*	4.0	--	--	--	4.0
752-753	*Congenital anomalies of genitourinary system*	4.0	--	--	4.0	8.1
754-756	*Congenital anomalies of musculoskeletal system*	--	4.0	4.0	--	8.1
758.0	*Down's syndrome*	4.0	--	--	4.0	8.1
758.1-758.9	*Other chromosomal anomalies*	--	--	--	--	--
744, 757, & 759	*All other and unspecified congenital anomalies*	16.1	12.1	8.1	12.1	48.3
760-779	Certain conditions originating in the perinatal period	378.7	257.8	52.4	76.5	765.5
760	*Newborn affected by maternal conditions which may be unrelated to present pregnancy*	--	--	--	8.1	8.1
761	*Newborn affected by maternal complications of pregnancy*	16.1	12.1	--	--	28.2
762	*Newborn affected by complications of placenta, cord, and membranes*	20.1	12.1	--	--	32.2
763	*Newborn affected by other complications of labor and delivery*	--	--	--	--	--
764	*Slow fetal growth and fetal malnutrition*	--	--	--	8.1	8.1
765	*Disorders relating to short gestation and unspecified low birthweight*	274.0	137.0	24.2	8.1	443.2
766	*Disorders relating to long gestation and high birthweight*	--	--	--	--	--
767	*Birth trauma*	4.0	20.1	--	4.0	28.2
768	*Intrauterine hypoxia and birth asphyxia*	--	--	--	--	--
768.2-768.4	*Fetal distress in liveborn infant*	4.0	8.1	--	--	12.1
768.5-768.9	*Birth asphyxia*	--	12.1	--	4.0	16.1
769	*Respiratory distress syndrome*	36.3	52.4	12.1	4.0	104.8
770	*Other respiratory conditions of newborn*	16.1	4.0	4.0	16.1	40.3
771	*Infections specific to the perinatal period*	--	--	12.1	16.1	28.2
772	*Neonatal hemorrhage*	--	--	--	--	--
773-774	*Hemolytic disease of newborn, due to isoimmunization, and other perinatal jaundice*	--	--	--	--	--
775.0-775.1	*Sydrome of "infant of a diabetic mother" and neonatal diabetes mellitus*	--	--	--	--	--
776.0	*Hemorrhagic disease of newborn*	--	--	--	--	--
775.2-775.9, 776.1-779	*All other and ill-defined conditions originating in the perinatal period*	8.1	--	--	8.1	16.1
780-799	Symptoms, signs and ill defined conditions	4.0	8.1	4.0	221.6	237.7
798.0	*Sudden infant death syndrome*	--	4.0	--	201.4	205.5
780-797 798.1-799	*Symptoms, signs and all other ill-defined conditions*	4.0	4.0	4.0	20.1	32.2
E800-E949	Accidents and adverse effects	--	--	--	28.2	28.2
E960-E969	Homicide	--	--	--	4.0	4.0
E967	*Child battering and other maltreatment*	--	--	--	--	--
E960-E966 E968-E969	*Other homicide*	--	--	--	4.0	4.0
Residual	ALL OTHER CAUSES	4.0	4.0	4.0	36.3	48.3

MATERNAL MORTALITY

Maternal mortality has decreased drastically over the years, both in New Mexico and nationally (Figure 3.10).

FIGURE 3.10
MATERNAL MORTALITY RATE
NEW MEXICO RESIDENTS AND UNITED STATES
1940-1979



In 1979, the deaths of 10 New Mexico resident women were assigned to complications of pregnancy, childbirth and the puerperium. This is the highest number of maternal deaths in the State since 1974 when there were also ten. Prior to that, the number had not been that high since 1965. The ten deaths resulted in a maternal mortality rate of 40.3 maternal deaths per 100,000 live births. Nationwide 270 maternal deaths were recorded for a maternal mortality rate of 7.8 maternal deaths per 100,000 ~~population~~ LIVE BIRTH.

The national rate is the lowest ever recorded. New Mexico's 1979 rate is a five fold increase over the previous year when only two maternal deaths were reported.

The reader is cautioned as to the high rates and sometimes drastic changes in rate resulting because of the relatively small numbers of maternal deaths and births in New Mexico in recent years. Also the reader is reminded that these figures do not represent the deaths of all pregnant women but rather only those deaths attributed to complications of pregnancy, childbirth and the puerperium (ICDA codes 630-676) according to the guidelines set forth by the National Center for Health Statistics.

While the States maternal rate was below the national rate in 1977 and 78, the 1979 rate exceeded the national rate by a factor of five (Table 3.25). The Indian women were both Navajo. The actual number of events are included for the reader's analysis of maternal mortality (Table 3.25).

TABLE 3.25
MATERNAL MORTALITY BY ETHNIC/RACE
NEW MEXICO RESIDENTS 1976-79
UNITED STATES 1976-79

ETHNIC/RACE	1979		1978		1977		1976	
	NO.	RATE	NO.	RATE	NO.	RATE	NO.	RATE
NEW MEXICO								
ALL RACES	10	40.3	2	8.4	2	8.7	3	13.5
White	7	33.1	2	9.9	2	10.3	3	16.3
Hispanic	4	37.2	1	9.4	1	9.9	3	30.9
Non-Hispanic	3	28.9	1	10.5	1	10.7	—	—
Black	1	188.7	—	—	—	—	—	—
Indian	2	67.3	—	—	—	—	—	—
Other	—	—	—	—	—	—	—	—
UNITED STATES								
ALL RACES	270	7.8	321	9.6	373	11.2	390	12.3
White	NA	NA	171	6.4	208	7.7	231	9.0
Other	NA	NA	150	23.0	165	26.0	159	26.5

Rate Per 100,000 Live Births

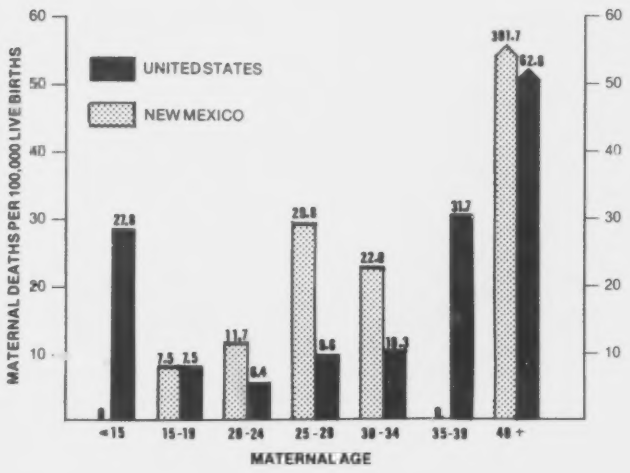
The increased maternal mortality in the State in 1979 does not appear to have been geographically confined. The deaths were distributed among eight of the State's counties with two counties—McKinley and Dona Ana—recording two deaths each.

In cause also there seemed to be no common factor to suggest any pattern in the increased maternal mortality for 1979. The causes varied and included pre-eclampsia, postpartum hemorrhage, retained placenta, embolism and tubal pregnancy.

The pattern nationally is a high rate of mortality for the young mother, decreasing to a minimum for ages 20-24, and then increasing with advancing age. Because of the relatively few maternal deaths in the State variations from the national pattern are noted.

New Mexico's high rates of mortality for certain age groups are evident in Figure 3.11.

FIGURE 3.11
MATERNAL MORTALITY RATES BY AGE OF MOTHER
NEW MEXICO RESIDENTS 1977-79 AVERAGE
UNITED STATES 1978



In 1979, two of the deaths were to women age 20-24, four in age 25-29, two in age 30-34 and two were forty or older.

FETAL MORTALITY

A fetal death is defined as death in utero. New Mexico statute requires the reporting of all fetal deaths of 20 weeks or more gestation. New Mexico's fetal death ratio (fetal deaths per thousand live births) has consistently been lower than nationally (Figure 3.12).

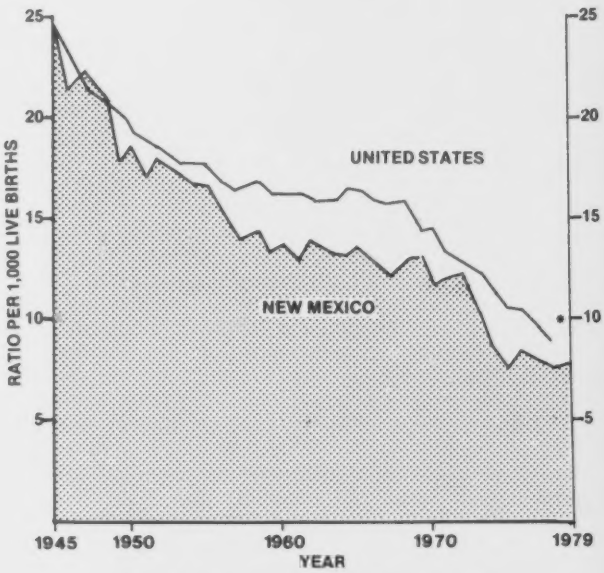
New Mexico's 1979 total of 206 resident fetal deaths resulted in a fetal death ratio of 8.4 fetal deaths per thousand live births. This represents a 1% increase over the previous year's rate. Only 16 states recorded fetal death ratios lower than New Mexico, as the states ranged from 5.9 (Massachusetts) to 15.3 (Virginia). The New England division did report the lowest ratio nationally (Figure 3.13).

New Mexico's fetal death ratio's by age are lower than nationally (Figure 3.14). The low rate for New Mexico's under 15 is most likely a random fluctuation of the small numbers invoived, as the general trend is high rates for younger and older women.

Fetal death data for New Mexico's counties are presented in Table 3.26 for a five year time period. Notable fluctuations in ratio are noted for some counties because of the small number of events involved.

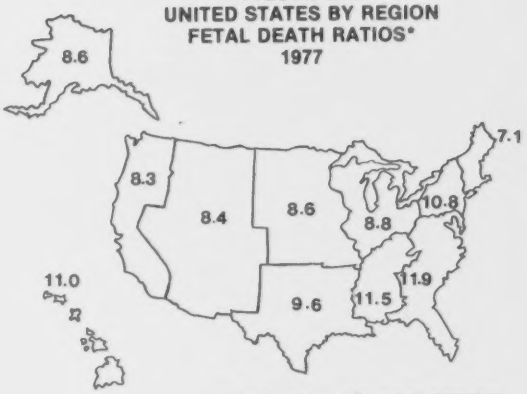
Ratios for New Mexico's White population are well below national ratios. The ratios for the State's Indian and Black are lower than national ratios for the non-White population. 41% of fetal deaths in the State reported an unknown or unspecified cause of death. Of specified causes, "complications of placenta, cord, and membranes," was cited most often (Table 3.27).

FIGURE 3.12
FETAL MORTALITY RATIO
NEW MEXICO RESIDENTS AND UNITED STATES
1945-1979



(*1979 U.S. DATA NOT AVAILABLE AT PRINTING)

FIGURE 3.13
UNITED STATES BY REGION
FETAL DEATH RATIOS*
1977



*RATIO PER 1,000 LIVE BIRTHS

TABLE 3.26
FETAL DEATHS
NUMBER AND RATIO BY COUNTY
NEW MEXICO RESIDENTS 1975-1979

HEALTH DISTRICTS	COUNTY	1979		1978		1977		1976		1975	
		No.	Ratio	No.	Ratio	No.	Ratio	No.	Ratio	No.	Ratio
	NEW MEXICO	206	8.4	199	8.3	201	8.7	196	8.8	169	8.0
1	MCKINLEY	26	16.0	17	10.6	17	10.6	14	9.0	15	10.1
1	SAN JUAN	17	8.1	23	12.1	11	6.2	18	10.9	9	6.0
2	COLFAX	3	13.6	4	19.4	1	4.6	5	24.9	5	25.4
2	LOS ALAMOS	2	10.4	1	4.8	2	11.7	—	—	—	—
2	MORA	—	—	2	31.3	2	31.3	—	—	1	14.5
2	RIO ARRIBA	7	11.0	8	12.0	6	9.6	8	13.2	4	6.5
2	SAN MIGUEL	5	10.9	4	8.8	2	4.6	3	6.6	3	7.6
2	SANTA FE	7	5.7	10	8.3	5	4.3	8	7.1	7	7.1
2	TAOS	8	20.1	1	2.8	3	8.1	1	2.9	3	8.5
3	BERNALILLO	43	6.0	42	6.2	55	8.5	41	6.8	31	5.4
3	SANDOVAL	5	9.2	5	9.0	10	17.8	2	3.8	4	7.9
3	TORRANCE	1	9.2	—	—	2	19.4	2	21.5	1	9.4
3	VALENCIA	15	11.2	13	9.8	10	8.2	11	10.2	3	3.4
4	CURRY	2	2.1	4	4.0	9	9.3	7	7.2	8	8.3
4	DE BACA	1	23.8	1	30.3	1	32.3	1	38.5	—	—
4	GUADALUPE	1	13.9	—	—	1	13.3	2	25.6	2	28.0
4	HARDING	—	—	—	—	—	—	—	—	—	—
4	QUAY	3	16.7	2	11.2	—	—	3	19.2	3	17.5
4	ROOSEVELT	2	7.3	6	21.7	2	8.1	3	11.6	5	18.5
4	UNION	1	13.2	—	—	1	13.0	—	—	1	20.0
5	CATRON	—	—	1	25.6	—	—	—	—	—	—
5	GRANT	3	5.5	6	11.7	6	11.7	2	4.2	—	—
5	HIDALGO	1	7.7	1	6.8	2	13.9	1	6.7	1	7.0
5	LUNA	3	10.1	5	21.7	3	10.3	3	10.6	2	6.6
6	CHAVES	7	7.6	4	4.7	8	9.1	11	14.8	13	19.2
6	EDDY	11	12.8	10	11.2	3	3.6	10	12.2	8	10.3
6	LEA	8	7.0	8	7.2	15	16.2	15	13.9	10	9.1
6	LINCOLN	—	—	5	33.1	1	5.4	1	6.3	1	6.8
6	OTERO	4	4.2	6	6.0	6	6.2	10	9.9	7	7.4
7	DONA ANA	19	11.2	9	5.7	14	8.8	11	7.0	17	10.9
7	SIERRA	—	—	1	13.9	1	9.3	—	—	1	10.9
7	SOCORRO	1	9.2	—	—	2	8.2	2	9.3	4	17.6

Ratio Per 1,000 Live Births

FIGURE 3.14
FETAL DEATH RATIO BY AGE OF MOTHER
NEW MEXICO RESIDENTS, 1977-79 AVERAGE
UNITED STATES 1977

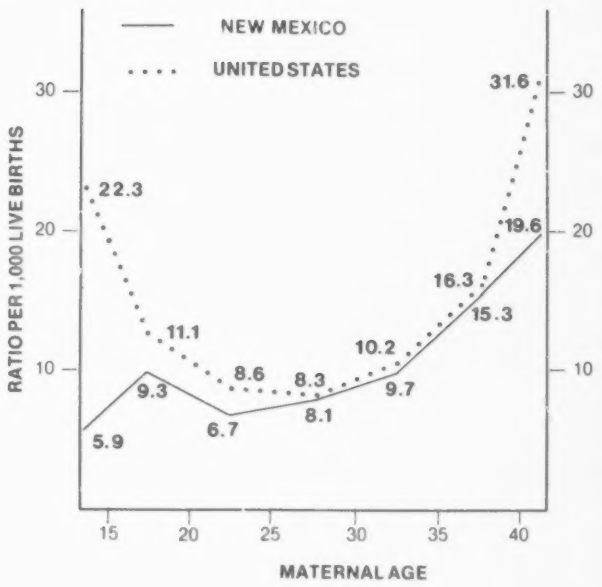


TABLE 3.27
FETAL DEATHS
NUMBER AND RATIO BY CAUSE
AND ETHNIC RACE
NEW MEXICO RESIDENTS 1979

9TH REVISION ICDA #	CAUSE/RACE	TOTAL		NON-HISPANIC WHITE		HISPANIC WHITE		BLACK		INDIAN		OTHER	
		No.	Ratio	No.	Ratio	No.	Ratio	No.	Ratio	No.	Ratio	No.	Ratio
	ALL FETAL DEATHS	206	8.3	80	7.7	83	7.7	6	11.3	37	12.4	—	—
740-759	Congenital anomalies	9	0.4	5	0.5	2	0.2			2	0.7		
760.0-760.9	Fetus affected by maternal conditions which may be unrelated to present pregnancy	8	0.3	3	0.3	4	0.4			1	0.3		
760.0	*Maternal hypertensive disorders*	*4*	*0.2*	*1*	*0.1*	*3*	*0.3*						
760.1	*Maternal renal and urinary tract diseases*	*1*	*0.0*			*1*	*0.1*						
760.3	*Other chronic maternal circulatory and respiratory diseases*	*1*	*0.0*							*1*	*0.3*		
760.5	*Maternal injury*	*2*	*0.1*	*2*	*0.2*								
761.0-761.9	Fetus affected by maternal complications of pregnancy	13	0.5	5	0.5	5	0.5	2	3.8	1	0.3		
761.1	*Premature rupture of membranes*	*8*	*0.3*	*4*	*0.4*	*3*	*0.3*	*1*	*1.9*				
761.3	*Polyhydramnois*	*1*	*0.0*			*1*	*0.1*						
761.5	*Multiple pregnancy*	*1*	*0.0*					*1*	*1.9*				
761.6	*Maternal death*	*2*	*0.1*	*1*	*0.1*	*1*	*0.1*						
761.8	*Other*	*1*	*0.0*							*1*	*0.3*		
762	Fetus affected by complications of placenta, cord and membranes	65	2.6	30	2.9	26	2.4	1	1.9	8	2.7		
763	Fetus affected by other complications of labor and delivery	1	0.0	1	0.1								
764	Slow fetal growth and fetal malnutrition	1	0.0			1	0.1						
765	Disorders relating to short gestation and unspecified low birth weight	13	0.5	4	0.4	7	0.7			2	0.7		
768	Intrauterine hypoxia and birth asphyxia	2	0.1	1	0.1	1	0.1						
769	Respiratory distress	—											
770	Other respiratory conditions of fetus	1	0.0			1	0.1						
772	Fetal hemorrhage	1	0.0			1	0.1						
773	Haemolytic disease of fetus due to isoimmunization	2	0.1	1	0.1	1	0.1						
775	Syndrome of "Infant of a Diabetic Mother"	3	0.1			2	0.2			1	0.3		
777	Preinatal disorders of digestive system	1	0.0			1	0.1						
778.0	Hydrops fetalis not due to isoimmunization	1	0.0	1	0.0								
	Cause unknown/unspecified	85	3.4	29	2.8	31	2.9	3	5.7	22	7.4		

Ratio Per 1,000 Live Births
0.0 Equals Less Than a Tenth of One Percent

TABLE 3.28
NEW MEXICO RESIDENTS
MORTALITY BY COUNTY
1979

HEALTH DISTRICTS	COUNTY	DEATHS		DEATHS RATE PER 1,000 POP.		INFANT MORTALITY						MATERNAL DEATHS	FETAL DEATHS	
						NEONATAL		POSTNEONATAL		TOTAL INF. DEATHS				
		MALE	FEMALE	No.	Rate	No.	Rate	No.	Rate	No.	Rate		No.	Ratio
	NEW MEXICO	5,200	3,417	8,617	6.9	219	8.8	133	5.4	352	14.2	10	206	8.9
1	MCKINLEY	243	145	388	6.6	18	11.1	24	14.8	42	25.8	2	26	16.0
1	SAN JUAN	280	138	418	5.3	15	7.2	12	5.7	27	12.9	-	17	8.1
2	COLFAX	67	59	126	9.6	2	9.0	-	-	2	9.0	-	3	13.6
2	LOS ALAMOS	41	19	60	3.2	2	10.4	1	5.2	3	15.5	-	2	10.4
2	MORA	19	15	34	7.4	1	12.8	-	-	1	12.8	-	-	-
2	RIO ARRIBA	144	82	226	7.9	4	6.3	6	9.4	10	15.7	1	7	11.0
2	SAN MIGUEL	133	65	198	8.8	2	4.3	3	6.5	5	10.9	-	5	10.9
2	SANTA FE	244	187	431	6.4	8	6.5	6	4.9	14	11.4	1	7	5.7
2	TAOS	85	54	139	7.0	3	7.5	1	2.5	4	10.1	-	8	20.1
3	BERNALILLO	1,477	1,001	2,478	6.4	50	7.0	29	4.0	79	11.0	-	43	6.0
3	SANDOVAL	121	61	182	7.3	2	3.7	7	12.9	9	16.5	-	5	9.2
3	TORRANCE	27	19	46	5.8	2	18.3	1	9.2	3	27.5	-	1	9.2
3	VALENCIA	229	151	380	6.7	21	15.7	8	6.0	29	21.7	-	15	11.2
4	CURRY	170	144	314	7.5	9	9.3	5	5.2	14	14.4	1	2	2.1
4	DE BACA	17	10	27	10.0	-	-	-	-	-	-	-	1	23.8
4	GUADALUPE	23	12	35	7.3	-	-	-	-	-	-	1	1	13.9
4	HARDING	7	4	11	10.0	1	66.7	-	-	1	66.7	-	-	-
4	QUAY	75	49	124	11.2	1	5.6	1	5.6	2	11.1	-	3	16.7
4	ROOSEVELT	82	66	148	8.9	4	14.7	2	7.3	6	22.0	-	2	7.3
4	UNION	34	38	72	15.0	1	13.2	-	-	1	13.2	-	1	13.2
5	CATRON	12	12	24	8.9	1	22.2	-	-	1	22.2	-	-	-
5	GRANT	114	86	200	8.0	7	12.8	1	1.8	8	14.7	-	3	5.5
5	HIDALGO	34	16	50	8.6	1	7.7	-	-	1	7.7	-	1	7.7
5	LUNA	116	62	178	12.3	3	10.1	2	6.7	5	16.8	-	3	10.1
6	CHAVES	299	181	480	9.4	10	10.8	1	1.1	11	11.9	1	7	7.6
6	EDDY	226	183	409	8.5	10	11.6	3	3.5	13	15.1	1	11	12.8
6	LEA	230	151	381	6.9	15	13.1	14	12.2	29	25.3	-	8	7.0
6	LINCOLN	49	30	79	7.3	-	-	-	-	-	-	-	-	-
6	OTERO	167	99	266	6.1	7	7.4	2	2.1	9	9.5	-	4	4.2
7	DONA ANA	311	197	508	5.6	14	8.2	3	1.8	17	10.0	2	19	11.2
7	SIERRA	79	50	129	14.8	-	-	-	-	-	-	-	-	-
7	SOCORRO	45	31	76	7.0	5	21.1	1	4.2	6	25.3	-	1	4.2

Infant Mortality Rates and Fetal Death Ratios per 1,000 Live Births

COMMUNICABLE DISEASES

INTRODUCTION

The distribution of communicable disease in New Mexico is influenced by a blend of three cultures in a unique environment. Disease more commonly associated with certain racial groups...for example, diphtheria among the Navajo; shigella on Indian Reservations; disease, like brucellosis, related to ingestion of Mexican dairy products; and diseases of geography, like plague, endemic to New Mexico...these all color the overall disease picture.

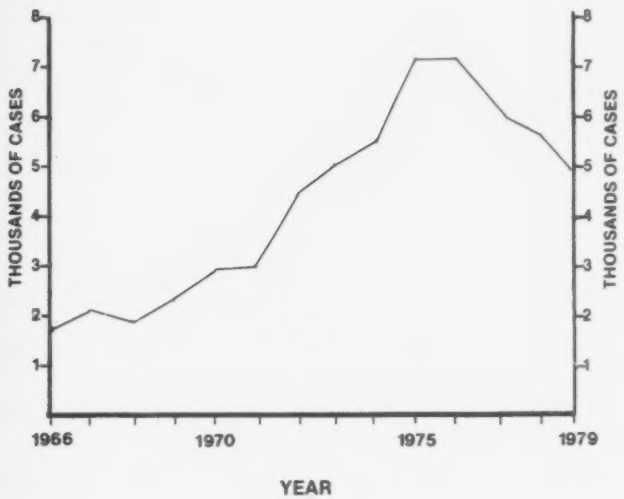
Data presented is limited to those diseases declared to be notifiable according to the regulations governing the reporting in New Mexico.

VENEREAL DISEASE

The decrease in the number of cases of gonorrhea reported in New Mexico for the last three years indicate a reversal in the increasing trend evident in the State for so many years (Figure 4.1).

FIGURE 4.1
GONORRHEA CASES REPORTED
NEW MEXICO OCCURRENCES

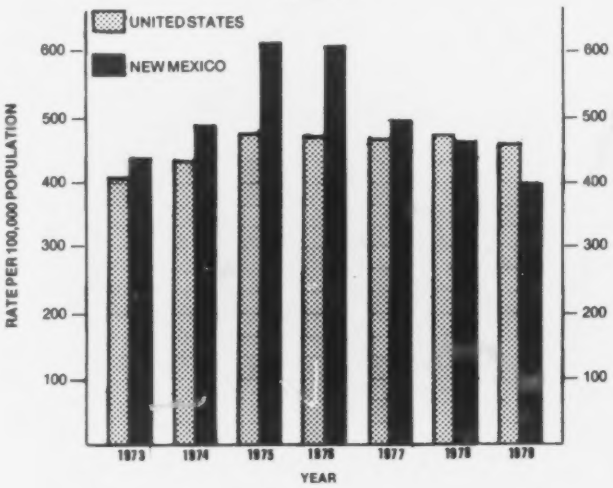
1966-1979



The number of reported cases in New Mexico dropped by 17% in 1977, by 6% in 1978, and then dropped another 12% in 1979. The total number of cases of gonorrhea reported in the State during 1979 was 4,918 cases.

Comparison of case rates (number of cases per 100,000 population) for gonorrhea in New Mexico reflect the decreasing trend in the State the last few years. In 1978, for the first time New Mexico's gonorrhea case rate was lower than the national rate. The further decrease in 1979 has left the State's rate 14% lower than the national rate. This is a notable change from earlier years when New Mexico's rate was as much as 30% higher than the national rate.

FIGURE 4.2
GONORRHEA
CASES PER 100,000 POPULATION
NEW MEXICO RESIDENTS
AND UNITED STATES
1973-1979



In 1979, New Mexico's gonorrhea case rate ranked twenty-third highest among the states—down from eighteenth in 1978. Alaska has reported the highest incidence rate among the states in recent years.

Thirty-two of the states reported decreases in incidence rate resulting in the overall decrease in the rate of incidence of gonorrhea nationally in 1979.

The decrease in the State's incidence rate in 1979 resulted from a decrease in incidence rate for all ages except 0-14 (Table 4.1).

The State's incidence rates are lower than national rates for all groups except the 30-34 age group for which New Mexico's incidence rate is about 14% higher than nationally.

TABLE 4.1
NEW MEXICO AND UNITED STATES
GONORRHEA
AGE SPECIFIC CASE RATES
1976-1979

CASE RATES PER 100,000 POPULATION	ALL AGES	AGE GROUP 0-14	15-19	20-24	25-29	30-34	35+
NEW MEXICO:							
1979	396.3	13.8	815.3	1611.1	1059.1	598.8	70.5
1978	462.0	13.3	939.2	1922.8	1251.1	602.5	91.9
1977	495.4	14.7	873.8	2112.6	1461.1	734.7	102.0
1976	611.0	7.6	982.2	2892.5	1775.3	860.9	141.1
UNITED STATES:							
1979	459.4	24.3	1211.4	1910.0	1115.5	524.6	76.9
1978	468.3	11.1	977.6	2009.9	1648.0	833.8	127.0
1977	465.9	23.4	1212.4	2009.4	1153.5	523.7	76.5
1976	470.5	22.8	1253.6	2070.6	1136.7	535.5	74.1

United States Data Source:
VD Statistical Letter 1976-1979 Center for Disease Control.

Number of reported cases of gonorrhea and case rates per 100,000 population for New Mexico's counties are presented in Table 4.2. The case rates ranged from a high of 928.9 for McKinley County to a low of 20.8 in Union County, with 2 counties reporting no cases. The rate decreased in 20 counties in 1979 resulting in an overall State decline.

TABLE 4.2
NEW MEXICO
OCCURRENCE BY COUNTY
GONORRHEA AND SYPHILIS CASES REPORTED

	COUNTY	GONORRHEA Number	GONORRHEA Rate	SYPHILIS INFECTIOUS Number	SYPHILIS INFECTIOUS Rate	SYPHILIS NON-INFECTIOUS Number	SYPHILIS NON-INFECTIOUS Rate
NEW MEXICO		4,918	396.3	159	12.8	74	6.0
HEALTH DISTRICTS 1	MCKINLEY	549	928.9	51	86.3	4	6.8
	SAN JUAN	483	615.3	9	11.5	6	7.6
2	COLFAX	6	45.8	1	7.6	1	7.6
	LOS ALAMOS	7	37.4	—	—	—	—
	MORA	13	282.6	—	—	—	—
	RIO ARRIBA	81	284.2	3	10.5	2	7.0
	SAN MIGUEL	168	743.4	1	4.4	4	17.7
	SANTA FE	196	289.9	4	5.9	12	17.8
	TAOS	35	175.0	—	—	1	5.0
3	BERNALILLO	2,028	520.9	59	15.2	24	6.2
	SANDOVAL	137	548.0	—	—	2	8.0
	TORRANCE	5	62.5	—	—	—	—
	VALENCIA	86	152.2	3	5.3	1	1.8
4	CURRY	198	470.3	1	2.4	3	7.1
	DE BACA	1	37.0	—	—	—	—
	GUADALUPE	15	312.5	—	—	—	—
	HARDING	—	—	—	—	—	—
	QUAY	5	45.0	3	27.0	—	—
	ROOSEVELT	48	289.2	—	—	1	6.0
	UNION	1	20.8	—	—	—	—
5	CATRON	—	—	—	—	—	—
	GRANT	18	72.3	2	8.0	—	—
	HIDALGO	5	86.2	—	—	—	—
	LUNA	26	179.3	2	13.8	—	—
6	CHAVES	174	339.2	6	11.7	6	11.7
	EDDY	112	232.8	2	4.2	1	2.1
	LEA	195	352.0	1	1.8	3	5.4
	LINCOLN	5	46.3	—	—	—	—
	OTERO	59	136.3	4	9.2	—	—
7	DONA ANA	244	270.2	7	7.8	3	3.3
	SIERRA	2	23.0	—	—	—	—
	SOCORRO	16	148.1	—	—	—	—

Rate Per 100,000 Population
Includes both Civilian and Military Population.

In the last six years, New Mexico's case rate for syphilis (all stages) has dropped 60% from 47.2 cases to 19.1 cases per 100,000 population.

The incidence rate for primary and secondary syphilis increased in 1979 both nationally and in New Mexico. The State rate increased by 7% while the national incidence rate rose by 14%, leaving the incidence in the State at a level 32% lower than nationally (Table 4.3). The national rates exceed New Mexico rates in all age groups.

TABLE 4.3
NEW MEXICO AND UNITED STATES
PRIMARY AND SECONDARY SYPHILIS
AND SPECIFIC CASE RATES
1976-1979

CASE RATES PER 100,000 POPULATION	ALL AGES	AGE GROUP 0-14	15-19	20-24	25-29	30-34	35+
NEW MEXICO:							
1979	7.8	.0	11.5	25.6	12.2	19.0	4.7
1978	7.3	.3	10.8	23.7	19.2	17.7	2.9
1977	8.5	.3	5.4	33.3	24.4	10.7	5.7
1976	12.4	.6	11.6	47.2	38.2	21.7	6.0
UNITED STATES:							
1979	11.4	.3	16.2	35.3	31.6	22.4	5.4
1978	10.0	.3	14.6	30.8	29.0	19.5	4.6
1977	9.5	.3	13.8	30.3	26.6	18.4	4.5
1976	11.1	.4	17.3	35.1	31.2	22.9	5.2

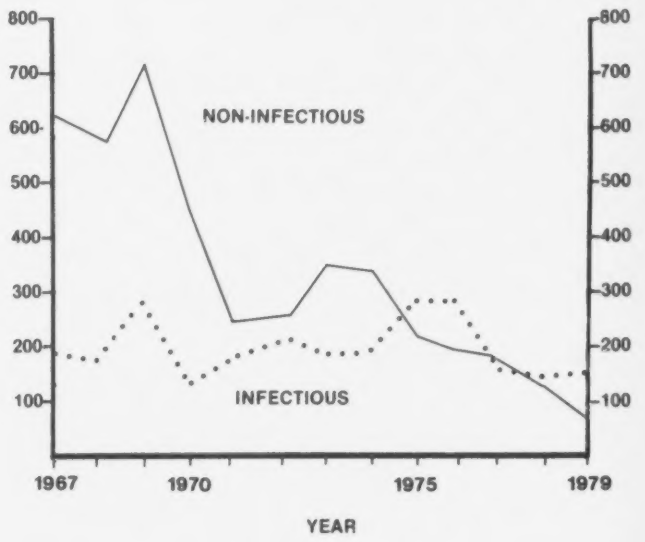
Source: *VD Statistical Letter 1976-1979 Center for Disease Control.*

A breakdown of syphilis cases by infectious and non-infectious also illustrates the recent decreasing trend of reported cases in New Mexico (Figure 4.3).

The number of reported syphilis cases and case rates by county are presented in Table 4.2.

FIGURE 4.3
SYPHILIS CASES REPORTED
NEW MEXICO OCCURRENCES

1967-1979



PLAGUE

A variety of factors—including climatic conditions, rodent and flea population dynamics, and steady human encroachment into previously unsettled areas—are probably responsible for the increased number of plague cases during recent years.

Of the thirteen cases of plague reported in the nation during 1979, 4 cases occurred in New Mexico, 3 in Arizona, 2 each in Colorado, Oregon and California. 56% of all cases occurring in the United States since 1974 have been reported in New Mexico. Of the four cases reported in 1979 in New Mexico one occurred in April, two in June and one in July.

FIGURE 4.4
PLAGUE
TOTAL CASES REPORTED BY YEAR
NEW MEXICO OCCURRENCES
1968-1979

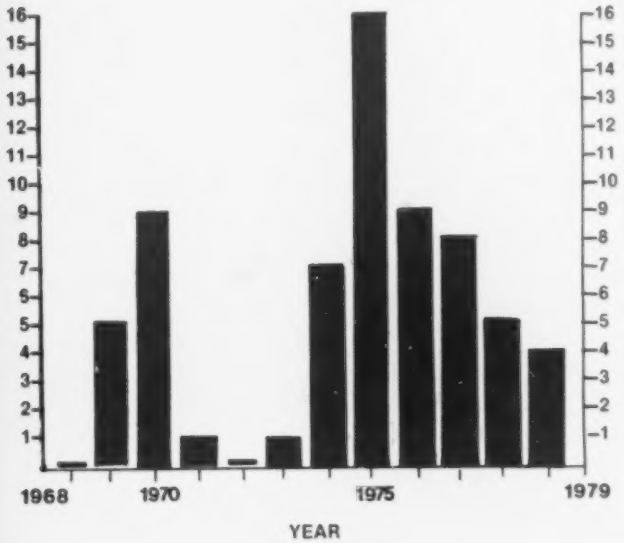


FIGURE 4.5
PLAGUE
TOTAL CASES REPORTED BY COUNTY
NEW MEXICO OCCURRENCES
1979

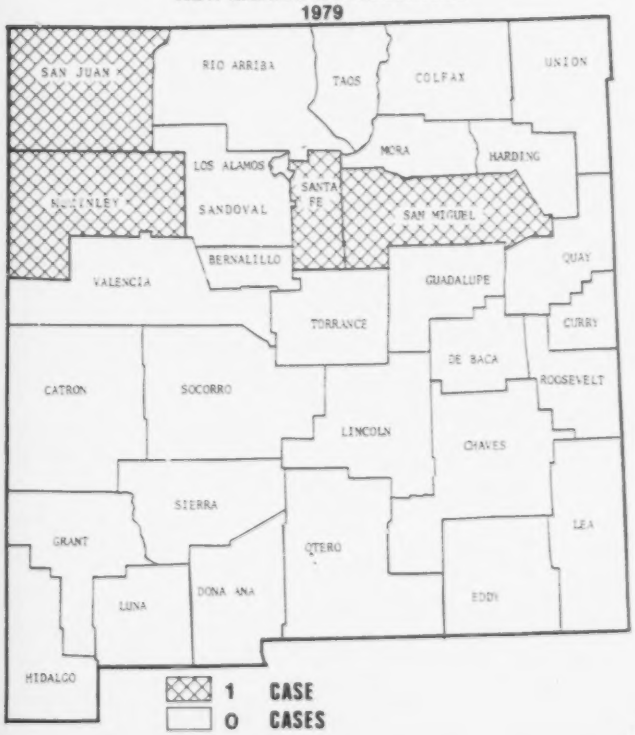


TABLE 4.4
NEW MEXICO OCCURRENCE
PLAGUE
1975-1979

YEAR	1975	1976	1977	1978	1979
Total Cases	16	9	8	5	4
Month Acquired:					
January	1	-	-	-	-
April	-	-	-	-	1
May	-	2	2	-	-
June	-	3	-	1	2
July	3	1	2	1	1
August	4	3	1	2	-
September	7	-	2	-	-
October	1	-	1	1	-
All Ages:	16	9	8	5	4
Male	4	5	6	2	1
Female	12	4	2	3	3
0 - 9	6	2	3	1	-
Male	1	1	3	-	-
Female	5	1	-	1	-
10-15	7	3	-	2	1
Male	3	2	-	1	-
Female	4	1	-	1	1
16-19	-	1	-	-	1
Male	-	1	-	-	1
Female	-	-	-	-	-
20-29	1	-	-	-	-
Male	-	-	-	-	-
Female	1	-	-	-	-
≥ 30	2	3	5	2	2
Male	-	-	3	1	-
Female	2	3	2	1	2
FATAL CASES	2	2	-	-	2

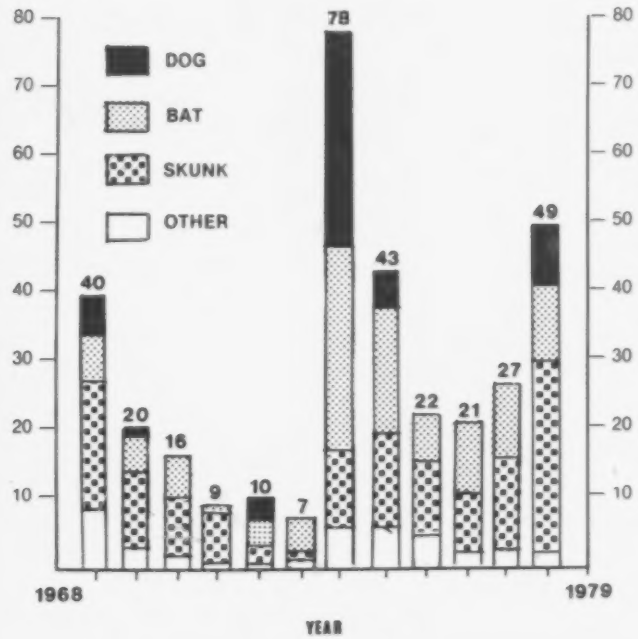
Two of the four patients in 1979 died. These were the first plague deaths in the State since 1976. Both persons who died had contacted septicemic plague. Of the other two, one had bubonic plague and the other had pneumonic plague.

RABIES

The number of rabies reported in New Mexico in 1979 was the highest since the rabies epizootic of 1974. In 1979, there were a total of 49 cases of rabies in animals reported in the State, as compared to 27 the previous year (Figure 4.6).

During the previous three years (1976-78) there had been no cases of canine rabies reported in the State but, in 1979, eight cases in dogs were reported. Six of the dogs were from southern Dona Ana County and were part of a canine rabies outbreak in the El Paso-Juarez area. Five fatal cases of human rabies occurred to Juarez citizens during this outbreak. Nationally four cases of human rabies were reported in 1979. No cases of human rabies have occurred in New Mexico since 1956.

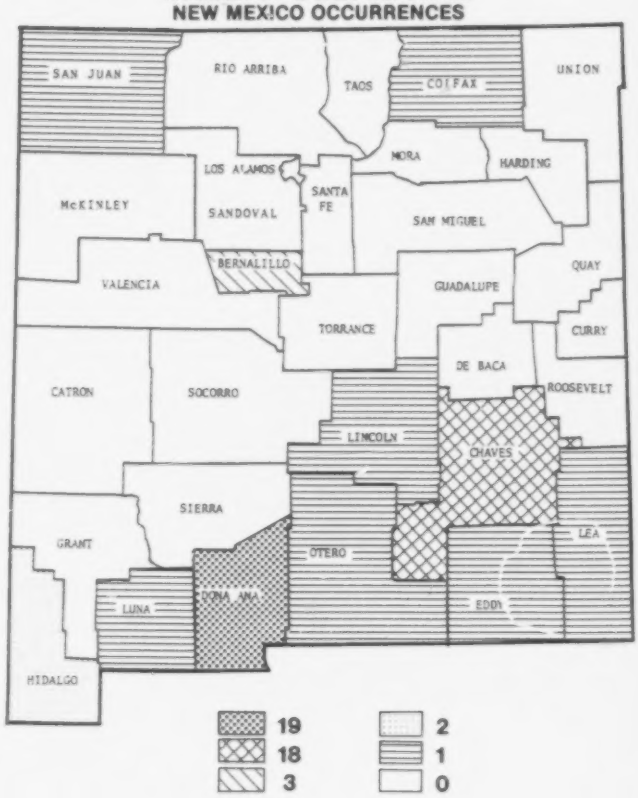
FIGURE 4.6
RABIES IN ANIMALS
CASES REPORTED
NEW MEXICO OCCURRENCES
1968-1979



A total of 5,119 laboratory-confirmed cases of animal rabies in the United States were reported in 1979, (12% in domestic animals). Of the 49 cases reported in New Mexico in 1979, there were 8 dogs, 1 cat, 27 skunks, 12 bats, and 1 coyote. Skunk rabies all occurred in the southern part of the State, 16 in Chaves, 8 in Dona Ana, 2 in Hidalgo and 1 in Eddy. Bat rabies were found in Dona Ana, Bernalillo, Colfax, Lea, Chaves, Luna and San Juan counties. Besides the six cases in Dona Ana County, rabies in dogs occurred in Otero and Chaves counties. The single rabied cat was from Lincoln County.

Dona Ana County, the center of the 1974 epizootic, reported the highest number of rabies cases in the State during 1979. As was the case nationally, rabies in wild animals continue to be the major problem.

FIGURE 4.7
RABIES
NUMBER OF CASES REPORTED
NEW MEXICO OCCURRENCES

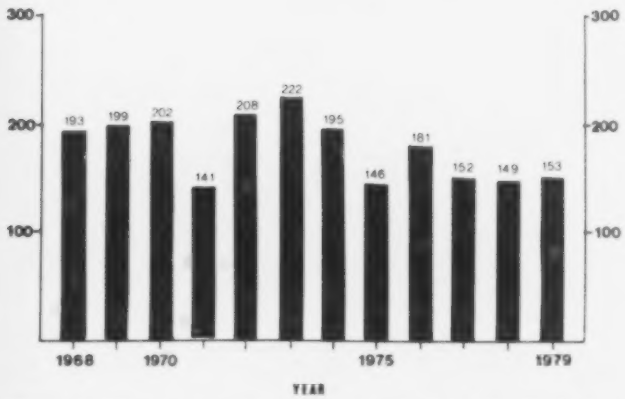


An increase in anti-rabies treatment coincided with an increase in the total number of rabies cases. During 1979, 47 post-exposure rabies treatment were administered after consultation with the Health Services Division, Epidemiology Unit in 1979 compared to 35 in 1978. No significant side effects were reported after any of the treatments. 19 of the 47 treatments were given following exposure to a proven rabid animal—12 following exposure to dog or cat, two after exposure to a skunk and five after exposure to a rabid bat.

TUBERCULOSIS

Nationally the number of tuberculosis cases decreased from 28,521 cases in 1978 to 27,669 cases in 1979, resulting in a 4% decrease in case rate, from 13.1 cases per 100,000 population to 12.6 in 1979. In New Mexico the number of tuberculosis cases increased in 1979 to a total of 153 cases (Figure 4.8).

FIGURE 4.8
TUBERCULOSIS
CASES REPORTED
NEW MEXICO OCCURRENCES
1968-1979



Though the number of cases reported in the State increased, the incidence rate for tuberculosis remained constant because of the increased population factor. New Mexico's case rate of 12.3 cases per 100,000 population was 6% lower the national incidence, and ranked twenty-first highest among the states.

Table 4.5 illustrates the marked decreasing trend in New Mexico over the years for both tuberculosis incidence and mortality. Tuberculosis mortality remains, however, 44% higher in the State than nationally.

TABLE 4.5
NEW MEXICO
TUBERCULOSIS MORBIDITY & MORTALIITY
1930-1979

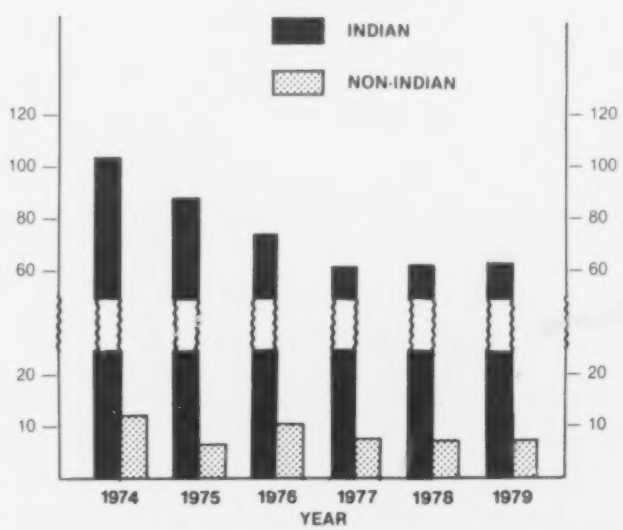
YEAR	INCIDENCE	MORTALITY
1930	*	169.6
1940	*	71.8
1950	*	37.0
1960	59.3	7.8
1970	19.9	2.7
1975	12.7	2.1
1976	15.5	2.7
1977	12.8	2.5
1978	12.3	1.8
1979	12.3	1.3

RATE PER 100,000 POPULATION

*Due to changes in reporting over the years, these figures would not be directly comparable to figures for more recent years.

Nationally, the incidence rate for tuberculosis is almost five times higher for the non-White population that it is for the White population. In New Mexico, the incidence of tuberculosis is notably higher for the State's Indian population than for the rest of the State's population. Though the incidence rate for the Indian has decreased in recent years, it remains nearly eight times higher than for the non-Indian population of the State. The last three year's data show only slight changes in tuberculosis incidence rate for both Indian and non-Indian population.

FIGURE 4.9
TUBERCULOSIS INCIDENCE RATES
NEW MEXICO OCCURRENCES
1974-1979



Mortality from tuberculosis has also decreased in New Mexico. Most notable is the decrease in the mortality rate for the Indian which has decreased 69% since 1975. The rate for the Indian remains however, over three times higher than the overall state rate, and 4.7 times higher than nationally. Tuberculosis mortality for non-Hispanic White is at the same level as nationally, while the rate for Hispanic exceeds the national rate.

TABLE 4.6
NEW MEXICO RESIDENTS
TUBERCULOSIS DEATH
RATES BY ETHNIC/RACE
1975-1979

ETHNIC/RACE	TUBERCULOSIS MORTALITY RATE				
	1975	1976	1977	1978	1979
TOTAL	2.1	2.7	2.5	1.8	1.3
NON-HISPANIC	1.0	2.1	1.6	1.1	0.9
HISPANIC	1.6	1.8	2.0	1.7	1.3
BLACK	0	0	4.4	0	0
INDIAN	13.6	12.1	11.0	7.4	4.2

Rate Per 100,000 Population

During 1979, the incidence of tuberculosis was highest in McKinley County which had an incidence rate about five times higher than the national rate. Cases were reported from 24 of New Mexico's 32 counties and the incident rate in ten of the State's counties exceeded the national rate (Figure 4.7).

FIGURE 4.10
TUBERCULOSIS
NUMBER OF CASES REPORTED
PER 100,000 POPULATION
NEW MEXICO OCCURRENCES
1979

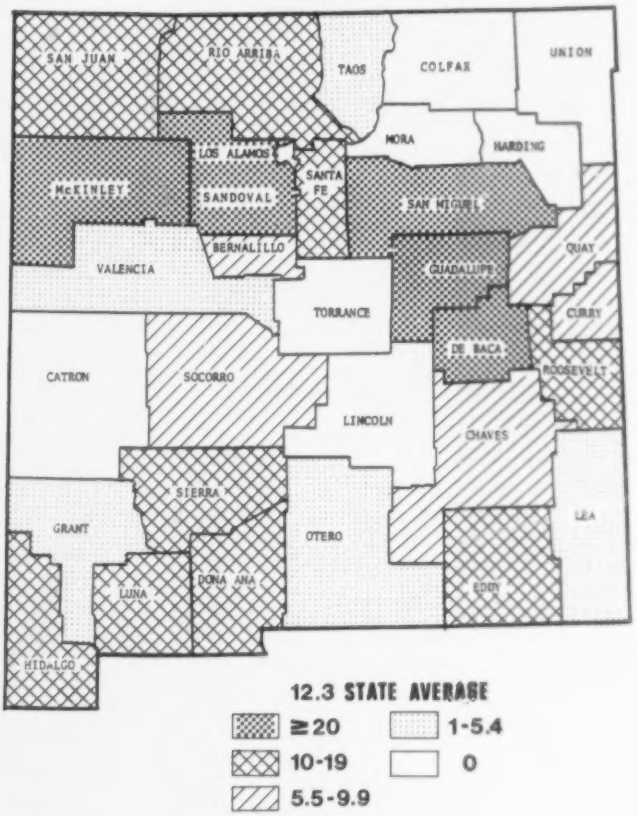


TABLE 4.7
TUBERCULOSIS
CASE RATE PER 100,000 POPULATION
SPECIFIC AGE GROUPS
NEW MEXICO OCCURRENCES
1978-1979

AGE	UNITED STATES		NEW MEXICO	
	1978	1979	1978	1979
TOTAL	13.1	12.6	12.3	12.3
0 - 4	5.4	6.3	4.7	9.8
5 - 14	1.8	1.8	3.7	3.7
15 - 24	5.1	5.2	3.2	3.5
25 - 44	12.3	11.7	13.9	9.6
45 - 64	21.9	20.4	16.2	18.5
65 +	33.9	32.1	47.1	47.7

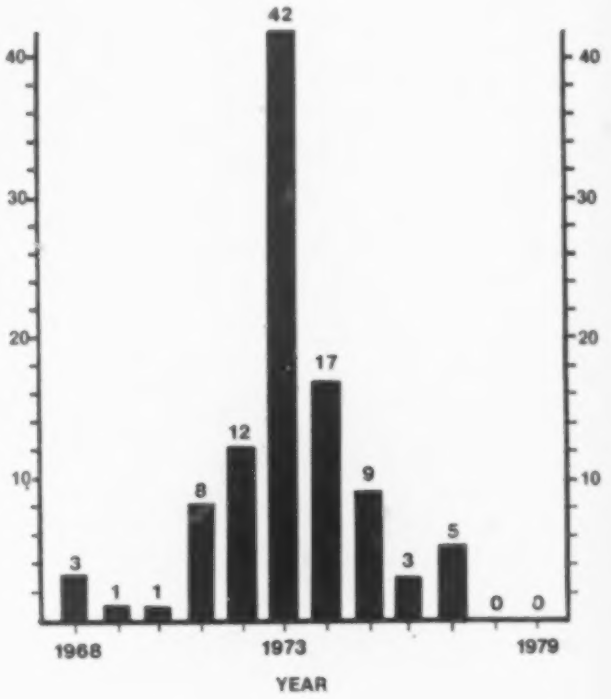
1979 Tuberculosis Statistics, CDC, Rates Per 100,000 Population

Incidence rates were ~~lower~~ higher in New Mexico than nationally for ages under 15 and 65 and older. Rates are generally highest for older age groups both nationally and in the State (Table 4.7).

DIPHTHERIA

Not a single case of diphtheria was reported in New Mexico during 1979. As seen in Figure 4.11, the last major outbreak of diphtheria in the State occurred in 1973. The incidence of diphtheria nationally is low and continues to fall. In 1979, 59 cases were reported nationally. Fifty of these cases were in the state of Washington.

FIGURE 4.11
DIPHTHERIA
CASES REPORTED
NEW MEXICO OCCURRENCES
1968-1979



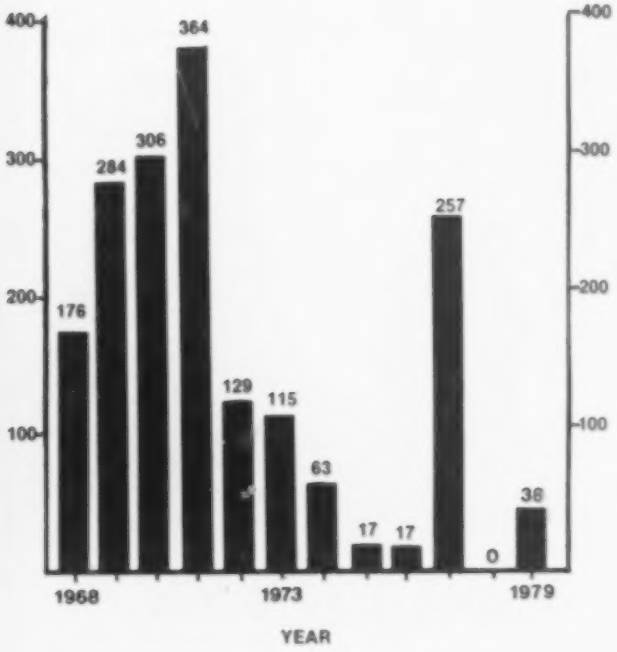
MEASLES

In 1979, the reported occurrence of measles in the United States reached its lowest level since measles became nationally notifiable. This represents a 50% decline from 1978. A national effort is under way to eliminate indigenous measles from the United States by October 1, 1982.

There were 38 cases of measles in New Mexico in 1979 compared to 0 in 1978 (Figure 41.2). Of the 38 cases, 74% (28 cases) occurred in two small outbreaks—an outbreak of 9 cases in Albuquerque and an outbreak of 19 cases in Silver City. All of the cases in the Albuquerque outbreak occurred in Indo-Chinese refugees.

The last major outbreak of measles in the State occurred in 1977 and centered in Valencia and Torrance Counties.

FIGURE 4.12
MEASLES
CASES REPORTED
NEW MEXICO OCCURRENCES
1968-1979



Of the 38 cases of measles in New Mexico, 30% were age 1-4, and 44% age 15-19. There was 1 case in the 20-24 age group but none older.

RUBELLA

The number of rubella (German measles) cases reported in New Mexico increased from 4 cases in 1978 to 12 cases in 1979.

Nationally reported rubella incidence in 1979 was the lowest reported, less than 20% of that reported in 1969, the year of vaccine licensure. Only eight states reported fewer cases in 1979 than did New Mexico.

Overall, the incidence rate (cases per 100,000 population) in New Mexico was less than one-fifth the national case rate. However, the incidence rate in certain areas of the State greatly exceeded the national figure.

FIGURE 4.13
RUBELLA
CASES REPORTED
NEW MEXICO OCCURRENCES
1969-1979

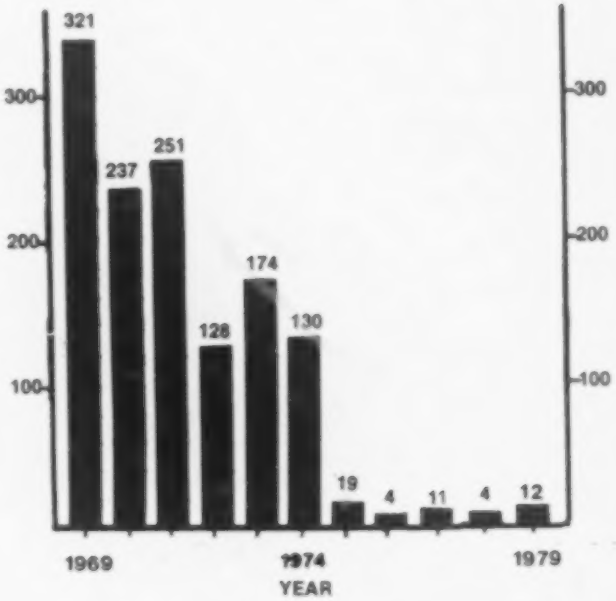
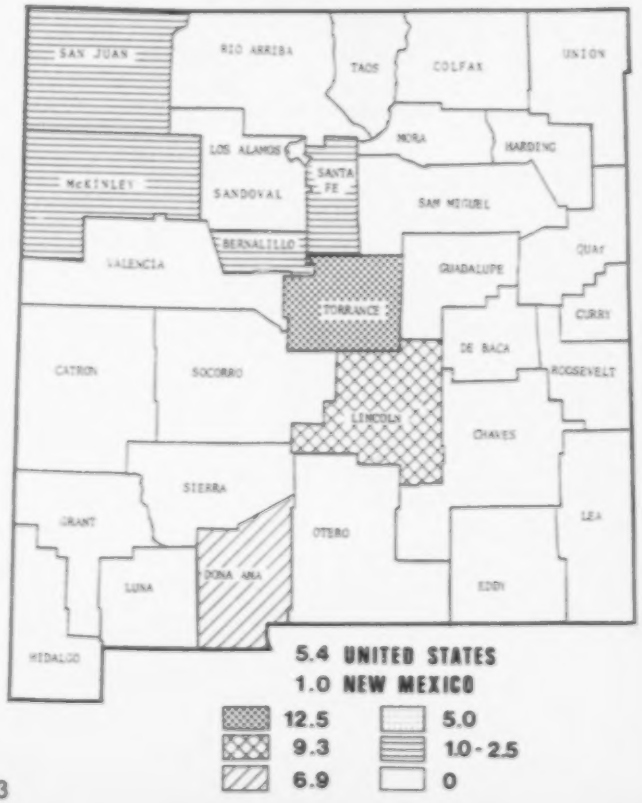


FIGURE 4.14
RUBELLA
NUMBER OF CASES REPORTED
PER 100,000 POPULATION
NEW MEXICO OCCURRENCES 1979



OTHER COMMUNICABLE DISEASES

Numbers of cases and corresponding case rates per 100,000 population are presented for New Mexico and the United States in Table 4.8. The data are based on cases of notifiable diseases reported in 1979. New Mexico's case rates exceeds nationai rates for encephalitis, plague, shigellosis, typhoid fever, and viral hepatitis.

There were 622 cases of shigella reported in the State in 1979, a 13% increase over the reported number for 1978. The incidence rate for the State was more than five times the national rate. Sandoval County had the highest incidence followed by McKinley and San Juan. The attack rate was highest in children age 0-4 years.

In 1979, 1,149 cases of hepatitis A were reported, 2 1/2 times the number reported in 1978. The highest rate of hepatitis occurred in Bernalillo County, followed by Rio Arriba, Eddy and Grant. The Bernalillo rate was about 15 times the national rate. Case rates were highest for persons age 20-24, followed by 25-29, 30-39 and 5-9 years.

In Table 4.9, the number of cases reported for selected communicable diseases in New Mexico are presented for the years 1966 to 1979.

TABLE 4.8
NOTIFIABLE DISEASES
REPORTED CASES AND CASE RATES
NEW MEXICO AND UNITED STATES 1979

NOTIFIABLE DISEASE	NEW MEXICO		UNITED STATES	
	CASES	RATES	CASES	RATES
Amebiasis	5	0.4	4,107	1.9
Anthrax	-	-	-	-
Aseptic Meningitis	46	3.7	8,754	4.1
Botulism	1	0.1	45	0.02
Brucellosis	-	-	215	0.1
Chancroid	-	-	840	0.4
Chicken Pox	210	16.9	199,081	102.9
Cholera	-	-	1	0.00
Diphtheria	-	-	59	0.03
Encephalitis				
Primary	2	0.2	261	0.1
Intermediate	4	0.3	938	0.5
Post Childhood Inf.	2	0.2	67	0.04
Legionellosis (*Legionnaires Disease*)	1	0.1	578	0.3
Leprosy	-	-	185	0.08
Listospirosis	-	-	94	0.04
Malaria	1	0.1	894	0.1
Measles	38	3.1	13,597	6.2
Meningococcal Infections	6	0.5	2,724	1.2
Mumps	15	1.2	14,225	6.5
Pertussis	30	2.4	1,623	0.7
Plague	4	0.3	13	0.01
Poliomyelitis				
Total	-	-	34	0.02
Paralytic	-	-	26	0.01
Psittacosis	-	-	137	0.06
Rubella	12	1.0	11,795	5.4
Congenital Syndrome	-	-	62	0.03
Salmonellosis (*Excluding Typhoid Fever*)	184	14.8	33,138	15.0
Shigellosis	622	50.1	20,135	9.1
Tetanus	-	-	81	0.04
Trichinosis	3	0.2	157	0.07
Tularemia	3	0.2	196	0.09
Typhoid Fever	4	0.3	528	0.2
Typhus Fever (*Flea-Borne, Endemic, Murine*)	-	-	69	0.03
Typhus Fever (*Tick Borne, Rky, Mt. Spotted*)	1	0.1	1,070	0.4
Viral Hepatitis				
A.	1,149	92.6	30,407	13.8
B.	97	7.8	15,452	7.0
Unspecified	30	2.4	10,534	4.7

SOURCE: MMWR, Vol. 28, No. 54, C.D.C.
RATES PER 100,000 POPULATION.

TABLE 4.9
SELECTED COMMUNICABLE DISEASES
NUMBER OF REPORTED CASES
NEW MEXICO OCCURRENCES
1966-1979

	1966	1967	1968	1969	1970	1971	1972	1973	1974	1975	1976	1977	1978	1979
Animal Rabies:	19	28	40	20	16	9	10	7	78	43	22	21	27	50
Dog	7	8	6	1	0	0	3	0	31	5	0	0	0	8
Cat	2	1	4	3	0	0	0	1	6	3	0	0	2	1
Bat	4	2	7	5	6	1	4	5	30	19	7	10	10	12
Skunk	3	14	18	11	8	7	2	1	11	13	10	9	14	27
Other Species	3	3	5	0	2	1	1	0	0	3	5	2	1	1
Diphtheria	2	0	3	1	1	8	12	42	17	9	3	5	0	0
Hepatitis	477	447	290	320	369	605	522	519	755	554	449	771	663	1149
Measles	1295	612	176	284	306	364	129	115	63	17	17	257	0	38
Pertussis	12	12	27	12	13	3	4	14	21	109	18	76	42	30
Plague	3	0	0	5	9	1	0	1	7	16	9	8	5	4
Rubella	113	309	136	321	237	251	128	174	130	19	4	11	4	12
Salmonella, Non-Typhoidal	108	192	96	87	102	88	94	154	104	96	83	116	265	184
Shigella	199	266	236	109	208	259	261	224	250	361	323	345	551	622
Tuberculosis	267	298	193	199	202	141	208	222	195	146	181	152	149	153
Typhoid	4	4	9	11	6	3	2	9	5	1	2	0	2	4
Gonorrhea	1866	2046	1876	2306	2882	2969	4377	4805	5433	7023	7137	5941	5600	4918
Syphilis:														
Infectious	133	182	171	263	128	162	223	183	184	284	286	180	145	159
Non-infectious	733	612	566	712	430	236	253	344	328	225	207	182	133	74

SPECIAL FEATURE

CIGARETTE ASSOCIATED RESPIRATORY DISEASES IN NEW MEXICO RESIDENTS

* * * * *

The unique mixture of cultures in New Mexico provides an opportunity to assess the patterns of disease occurrence in several distinct ethnic groups. In the 1970 Census, New Mexico's population included 38% Hispanic, 52% Anglos (non-Hispanic Whites), 7% American Indians, and 3% Blacks, Orientals and other ethnic groups. Similar proportions are expected in the 1980 census of the State's population. Particularly striking differences between the State's three largest ethnic groups have been described for respiratory diseases (Samet, 1980)[1].

Mortality rates for selected respiratory diseases and all causes of death for New Mexico's three major ethnic groups during a nine year period, 1968-77, are presented in Table 1, and Table 2, for males and females respectively. Corresponding United States rates by sex for all races (1973) are provided for comparison. For disease due to infectious agents (tuberculosis, influenza and pneumonia) mortality rates for American Indians exceed U.S. rates. Hispanics have similar, though less pronounced, excesses in these categories.

For cigarette associated respiratory diseases, mortality rates also vary markedly by ethnic groups. American Indian mortality rates for cancer of the lung and larynx, and for chronic obstructive pulmonary disease (COPD) are much lower than rates for the U.S. population and for other New Mexico ethnic groups. For these diseases, Hispanic male rates are intermediate between those of American Indians and Anglos. New Mexico Anglos of both sexes and Hispanic females are at increased risk of death due to COPD in comparison to the total U.S. population. Cancer incidence rates shown in Table 3, corroborate the mortality data.

Deaths attributed to "other respiratory diseases" and to "symptoms and other ill-defined conditions", (Tables 1 and 2), suggest that the observed differences might in part reflect reporting and coding pracitces. More deaths were assigned to these categories in all New Mexico ethnic groups than would be anticipated from U.S. rates. It is unlikely, however, that this factor alone could explain the differences in the occurrence of respiratory diseases.

TABLE 1
Average Annual Mortality Rates* by Ethnic Group for Respiratory Diseases, Symptoms and Other Ill Defined Conditions, and All Causes, for New Mexico Males, 1969-1977

Cause	Hispanic	Anglo	American Indian	U.S. Total†
Tuberculosis	4.8	2.8	24.4	2.6
(ICDA 10-19)	(51)	(57)	(49)	
Influenza, Pneumonia	59.9	49.3	90.8	33.5
(ICDA 470-474, 480-486)	(665)	(935)	(216)	
Cancer of Lung	20.4	60.8	8.6	57.9
(ICDA 162)	(221)	(1302)	(17)	
Cancer of Larynx	1.5	2.2	—	2.6
(ICDA 161)	(16)	(45)	(0)	
COPD	18.1	60.5	10.5	29.6
(ICDA 491, 492, 519.3)	(187)	(1203)	(19)	
Asthma	1.1	2.1	0.4	0.8
(ICDA 493)	(14)	(45)	(1)	
Other Respiratory Diseases	10.5	10.0	21.0	7.8
(ICDA 510-519)	(117)	(205)	(40)	
Symptoms and Other Ill Defined Conditions	56.1	47.2	134.6	17.8
(ICDA 780-796)	(656)	(984)	(299)	
All Causes	1020.0	1196.9	1513.6	1072.9
	(12,745)	(24,934)	(3,737)	

*per 100,000, age-adjusted to 1970 U.S. population. Numbers of deaths in each category shown in parentheses.
†1973 U.S. rates for all races combined.

TABLE 2
Average Annual Mortality Rates* by Ethnic Group for Respiratory Diseases, Symptoms and Other Ill Defined Conditions, and All Causes for New Mexico Females, 1969-1977

Cause	Hispanic	Anglo	American Indian	U.S. Total†
Tuberculosis	2.3	0.7	15.5	1.1
(ICDA 10-19)	(27)	(17)	(31)	
Influenza, Pneumonia	43.1	33.6	61.2	26.3
(ICDA 470-474, 480-486)	(495)	(832)	(137)	
Cancer of Lung	13.8	17.2	4.7	14.6
(ICDA 162)	(152)	(445)	(8)	
Cancer of Larynx	0.4	0.4	—	0.4
(ICDA 161)	(5)	(11)	(0)	
COPD	11.5	12.8	4.6	7.4
(ICDA 491, 492, 519.3)	(120)	(324)	(8)	
Asthma	0.8	1.6	—	1.0
(ICDA 493)	(9)	(42)	(0)	
Other Respiratory Diseases	6.5	5.1	16.9	3.9
(ICDA 510-519)	(72)	(130)	(33)	
Symptoms and Other Ill Defined Conditions	32.1	25.4	91.1	11.4
(ICDA 780-796)	(384)	(636)	(192)	
All Causes	671.6	706.7	844.6	814.2
	(8,098)	(17,749)	(1,996)	

*per 100,000, age-adjusted to 1970 U.S. population. Numbers of deaths in each category shown in parentheses.
†1973 U.S. rates for all races combined.

TABLE 3
New Mexico
Cancer of the Lung and Larnyx
Average Annual Incidence Rate*
by Ethnic Group and Sex
1969-1977

SITE	ANGLO	HISPANIC	AMERICAN INDIAN	S E E R #
MALE:				
Cancer of the Lung (ICDA 162)	75.9 (1,057)	25.5 (274)	10.5 (20)	76.1
Cancer of the Larynx (ICDA 161)	3.0 (35)	3.3 (48)	1.1 (2)	8.5
FEMALE:				
Cancer of the Lung (ICDA 162)	20.8 (308)	15.7 (174)	5.0 (8)	21.1
Cancer of the Larynx (ICDA 161)	0.9 (14)	0.8 (9)	-- (0)	1.3

*Per 100,000 age-adjusted to 1970 U.S. population.
*Numbers of cases in each category shown in parentheses.
#Surveillance, Epidemiology and End Results (SEER) program data, rates for all races combined, 1973-1976, age-adjusted to the 1970 U.S. population. SEER data are considered to be reasonably representative of the U.S. population.

Differences in smoking practices among New Mexico's three major ethnic groups provide a plausible explanation for this disease pattern. Little smoking information is available for American Indians and Hispanics, however. As a first step in testing this hypothesis, a prevalence survey of respiratory symptoms and disease, tobacco usage, and environmental exposures was conducted in 1979 among Bernalillo County Anglos and Hispanics. Over 1600 randomly selected subjects completed a self-administered respiratory symptoms questionnaire with supplemental ethnic, environmental, and occupational questions.

The preliminary results of this survey (Table 4) show that the prevalence of cigarette usage is similar in New Mexico Anglos and Hispanics. Approximately equal proportions of the two groups are CURRENT, EX, and NEVER smokers. However, the lifetime quantity of cigarettes consumed, measured in pack-years, by Hispanics was only half that of Anglos. One pack-year is defined as one pack per day for one year. Two packs per day for five years (10 pack-years) would be numerically the same as one pack per day for ten years, or half a pack per day for 20 years. The figures, in Table 4, then are an average reflecting into one indicator both daily consumption and length of time.

Occupational exposures associated with increased lung cancer risk were also less frequent among Hispanic males. Not enough American Indians were included in the survey to draw any conclusions, but their cigarette usage is generally thought to be very low.

TABLE 4
1979-1980
Cigarette Smoking Status and Lifetime Consumption by Age, Sex, and Ethnic Group
Sampling Bernalillo County Residents

		ANGLO		HISPANIC	
	AGE GROUP	SMOKING STATUS %	AVERAGE LIFETIME CONSUMPTION (PACK-YEARS)	SMOKING STATUS %	AVERAGE LIFETIME CONSUMPTION (PACK-YEARS)
MALES	20-39				
	Current	32.5	15.9	35.8	7.5
	Ex	25.5	12.2	30.2	8.6
	Never	42.0	--	34.0	--
	40-59				
	Current	34.4	43.3	45.7	25.4
	Ex	43.1	24.8	29.8	16.6
	Never	22.5	--	24.5	--
	≥ 60				
	Current	22.4	53.7	39.6	30.7
	Ex	41.6	43.5	27.1	21.3
	Never	36.0	--	33.3	--
FEMALES	20-39				
	Current	37.3	11.7	34.0	5.7
	Ex	17.0	7.7	19.6	5.6
	Never	45.7	--	46.4	--
	40-59				
	Current	31.6	30.7	26.9	18.7
	Ex	16.1	17.3	14.4	10.4
	Never	52.3	--	58.7	--
	≥ 60				
	Current	17.2	40.1	15.9	17.0
	Ex	23.9	28.9	19.0	18.9
	Never	58.9	--	65.1	--

The survey suggests that the variation by ethnic group of lung cancer and COPD occurrence is partially explained by cigarette and occupational exposure. Several additional studies of respiratory disease in New Mexico are in progress at the New Mexico Tumor Registry.

If tobacco use is determined to be the major factor in the differences, public education should be directed at maintaining the low risk status of New Mexico Hispanics and American Indians, as well as lowering the occurrence of cigarette associated disease among Anglos.

The mortality, incidence, and survey data were made available through the work and courtesy of the New Mexico Tumor Registry. Questions or comments may be addressed to the Registry at:

NEW MEXICO TUMOR REGISTRY
900 CAMINO DE SALUD, NE
ALBUQUERQUE, NEW MEXICO 87131

1) SAMET, J.M., KEY, C.R. KUTVIRT, D.M., WIGGINS, C.L.: *"Respiratory Disease Mortality in New Mexico's American Indians and Hispanics". American Journal of Public Health 70:492-497, 1980.*

* * * * *

Some alarming statistics have been developing on the dangers of "passive" smoking-(breathing smoke from other people's cigarettes). Though preliminary, and, as yet, lacking definite confirmation by subsequent studies, the data are suggestive. The most recent report comes from Japan. Conducted by Dr. Hirayama of Tokyo's National Cancer Centre Research Institute, the study showed that non-smoking women married to heavy-smoking men (*good for 20 or more cigarettes a day*) were "up to four times as likely to die of lung cancer as women married to abstainers". (*British Medical Journal, January 17, 1981*). Dr. Hirayama reports that breathing smoke from other people's cigarettes appears to be about one-third to one-half as dangerous as smoking directly.

Sidestream smoke is so toxic because it is unfiltered. It comes off a cigarette rather than going through it, and hence contains 3 times the tar, and 10 times the concentration of carcinogenic agents as the filtered smoke inhaled through the cigarette by the smoker. *(Executive Fitness Newsletter, May 2, 1981, Vol. 12, No. 9).*

A recent study by Drs. J.R. White, and H.F. Froeb at the University of California, San Diego, showed that non-smokers who had worked alongside smokers for many years had lung damage comparable to people good for between one and 10 cigarettes a day. An experiment done by researchers at the University of Zurich in Switzerland demonstrated that when a non-smoker is in a smoking room for just an hour, he can wind up with the same amount of carbon monoxide in his blood as if he had puffed one cigarette directly. And several studies have demonstrated that children whose parents smoke suffer more respiratory tract disease (including bronchitis, pneumonia and tonsillitis) than children whose parents do not smoke. (*Executive Fitness Newsletter, May 2, 1981, Vol. 12, No. 9*).

SPECIAL FEATURE
NEW MEXICO
50 YEARS
AS A VITAL STATISTIC REGISTRATION STATE
1929 - 1979

* * * * *

The second meeting of the New Mexico State Board of Health was held in Albuquerque on August 20, 1919. At this meeting were created four divisions of the Department of Public Health. The first of these mentioned in the records is the Division of Vital Statistics.

It is not surprising that such a division should be foremost in the minds of those health professionals, for the need to assess the State's health situation in more quantified terms than "bad", "many deaths", or a multitude of other adjectives, was a pressing aspect for a public health department in the State. The 1918 influenza epidemic which reached New Mexico in late summer of that year helped bring matters to a head. Tragic was the inability to cope medically with the epidemic, and also tragic was the lack of any organization to keep the statistical information for assessing the situation. The cases - the deaths - the numbers could only be guessed at.
So then, at the August 20, 1919 meeting, in addition to creating a Division of Vital Statistics, the recently formed State Board of Health adopted "regulations governing the reporting of births and deaths" and "regulations governing the disposal, interment, disinterment and transportation of the dead". The actual registration of births and deaths began in the fall of 1919.

From what can be inferred from available records, Dr. G.S. Luckett, Chief of the Division of Preventable Diseases also served as Chief of the Division of Vital Statistics until 1922, when Mrs. P.M. Ruleau was appointed Chief of the Division. The position of State Registrar was not created until 1928. Mrs. Ruleau held the position until her resignation in March of 1929. To complete the roll of New Mexico State Registrars - Miss Billy Tober held the position from April 1929 until May 1953. Miss Audrey Immel was State Registrar from June 1953 until 1968. After Miss Immel's resignation, Mr. Donald Bergstrom served as State Registrar until the spring of 1969. Mr. Joseph Marrachini held the position from 1969 until 1972. Mrs. Betty Silva a thirty plus year veteran of the Vital Statistics Office, and who so many times had served as acting State Registrar, held the position of New Mexico State Registrar from 1972 until her retirement in June, 1975. The present State Registrar, Mr. Michael W. Ammann, assumed the position in July, 1975, and under his direction, many changes in regulation, and new certificate formats have been implemented. Room does not allow the enumeration of the achievements of each of the Registrars; each has had problems to solve, difficulties to overcome, and the effort of each has left an imprint on public health in the State. The efforts of the staffs have been the real foundation upon which the Vital Records office has served its role in the State's public health over the years. Unable to list all staff members over the years, mention of one outstanding representative is made - Mrs. Theresa Salazar, whose efforts since 1952 have helped carry the office through many a crisis, has served to make the registrar's position easier.

Regressing once again into the past - though registration of births and deaths in the State began in 1919, it required much field work and public relations effort to make the people aware of the need for registration, and to comply with registration. In spite of all-out efforts, by 1922, only an estimated 70% of vital events occurring in New Mexico were being registered. Disappointed but not discouraged, efforts to reach into all areas of this very rural state were intensified.

In 1922, regulations for protection of the records of birth and death were adopted. The Board also revised the regulations regarding the reporting of births and deaths, and the disposal, interment, disinterment, and transportation of the dead. While the regulations prescribing prophylactic treatment for the prevention of infant blindness were adopted in March of 1920; it seems that enforcement of these regulations began in 1922, and that the regulation was also revised that year.

The Bureau of the Census made an official test survey in 1924 to ascertain if New Mexico would be admitted as a Registration State for births and deaths. To achieve such standing, a minimum registration of 90% of all vital events was required. The test results showed that the State did not even achieve 75% registration.

Shrugging off such setbacks, aften ten years of effort, the State achieved 90% registration in 1929, and in November of 1929, New Mexico became a Birth and Death Registration State.

The highlight of 1939, so far as the Vital Statistics office was concerned, was the purchase of a Dexigraph Camera to make photographic copies of certificates for issuance rather than typewritten ones. "The Dexigraph Camera eliminates the possibility of alteration of the certified copies in any way after issuance, prevents typographical errors in copying, and provides a time saving device of great value".

Issuance has been a major part of the Vital Statistics Office. Notably, during the war years, the need for a copy of one's birth certificate to prove citizenship, or for the filing of a Delayed Birth Certificate for those who never registered a birth certificate, placed a tremendous demand on the Vital Statistics Office. In 1941, 4,745 certified copies were issued, and by 1942, the number per year had risen to nearly 31,000. The number decreased to 22,000 in 1943 having reached its war years' peak in 1942. However, the point had been made. The need for one's birth certificate had been established, and that need has never diminished. Today, the Vital Statistics Office issues an average of about 111,500 copies of birth certificates per year.

A "follow-up" survey by the Bureau of the Census in 1941, showed New Mexico to be maintaining its 90% registration level, and in 1942, the Division of Vital Statistics, for the first time, issued a printed bulletin of statistical figures.

Tabulations up through 1942 did not include vital events of Indians since these were not registered in the Vital Records Office. During 1942, the ground work was laid by the Division of Vital Statistics and officials of the U.S. Indian Service for the registration of Indian births and deaths. In 1943, actual registration of these events was begun though it was realized that much time and labor would be required to attain at least 90% registration of all Indian births and deaths.

The 1943 legislature revised the Vital Statistics Law giving the State Board of Public Health full power to make rules and regulations to carry out the provisions of the Vital Statistics Act. The legislature raised the fee for certified copies from 50¢ to $1.00, and dropped the item concerning marital status from the New Mexico certificate. In line with provisions of the Vital Statistics Law of 1943, regulations governing the filing of a new birth certificate for adoption cases, legitimation of births by subsequent marriage, registration of foundlings and corrections of original certificates on file were promulgated by the State Board of Public Health July 6, 1943. "The promulgation of these regulations has achieved an outstanding aim of the State Registrar since 1929."

The certificate of death form was revised somewhat in 1945, and allowed for information regarding veterans' status. Though there never has been in the State a centralized registration of a marriage or divorce, due to the numerous requests for such data, the Vital Records Office began in 1945 to request this information from the courts and clerks and to publish such information. This service was performed until 1960.

A decrease in funds was partly responsible for the elimination of the position of Registration Field Agent in 1946. The position, as such, has never been revived and its passing signified the end of an era for its role in attaining complete registration had been vital. The hardy individuals who in this position had carried information, education and a public relation effort of the importance of birth and death registration into nearly every isolated community, and even individual homes in this rural State over terrible roads - where there were roads - (in the early years only about 10 miles of the State's roads were paved) in every sense were truly pioneers.

The sub-registrars have also played a vital role as the Vital Records' representative within the community. Today there is a sub-registrar in each of the 42 county health offices, and about 100 are distributed throughout the major communities of the Indian reservations. The rural and vast areas found on many of the reservations require the distribution of many sub-registrars, and reflect the State's past when, because of the rural nature of New Mexico, there were as many as 450 to 500 sub-registrars; the idea being that if there was a sub-registrar in just about every cluster of homes, it would improve the registration of events.

New regulations governing the preservation, disposition, transportation, interment and disinterment of dead human bodies became effective May 1, 1948. New forms of standard birth, death and stillbirth certificates were printed and distributed for use beginning January 1949. The examination of blood speciments of pregnant women for syphilis was first required by law in 1949.

According to the 1946 Annual Issue of the *New Mexico Health Officer*, the Vital Records Office rented "larger and more adaptable equipment to avoid taking all our I.B.M. punch cards to Denver for tabulating." It was around the early part of 1941 that an electric punch machine had been rented and codes had been devised for an 80 column punch card for birth and death information, and also for indexing cards for births and deaths. Using a similar 80 character record format, the data was entered on computer tape beginning in the early Sixties. For 1980, the record format will be increased to 359 characters for computer entry.

A complete revamping of New Mexico's Vital Statistics laws was accomplished in 1961 when the State adopted the "Model Vital Statistics Law" designed by the National Committee on Vital Statistics. However, no changes to the certificate formats were forthcoming.

The late Seventies has been a busy time of growth and change for the Vital Statistics Office.

In 1977, enacted legislation delegated to the Vital Statistics Bureau the responsibility for collection of reports of induced abortions as required by law, and for the statistical tabulation of data from these reports. Also foreign children birth registration was enacted in 1977, whereby children of foreign birth, adopted in New Mexico by state residents, could obtain a modified certificate of birth.

Regulations governing the preservation, disposition, transportation, interment and disinterment of dead human bodies and fetal remains were enacted in 1977, to replace those of 1948 and thereby brought the regulations more in line with the Model Law of 1961. Also in 1977, regulations governing the Vital Statistics Act were enacted, outlining for the first time specifics in regard to the Model Law.

In 1979, culminating several years of effort, revised certificates of birth, death, and fetal death were printed for use beginning in 1980. These certificates were formated after the "model certificate" and the added information collected will serve in assessing health needs and health levels of the people in New Mexico.

The growth and complexity of the Eighties will pose new challenges as the Vital Statistics Bureau seeks to fulfill its purpose to provide the people of the State with the needed documents of birth and death, and also with the data which serves as the basis for all health evaluation and planning in the State.
Public Health efforts made in the State are reflected in the vital statistic data. These statistics have provided and will continue to provide direction to health efforts. Data characterizing "the times" is summarized in tribute to those whose efforts have made possible their collections. The reader is reminded that data prior to 1943 does not include vital events

of Indians, and that definition and categorization changes have occurred over the years.

1929 New Mexico's infant death rate of 140 infant deaths for every thousand live births was the highest in the nation. There occurred 30 stillbirths per 1000 live births, and 780 maternal deaths for every 100,000 live births. There were 29 births for every 1000 people in the State; 14% of births were unattended, 29% attended by midwives, and 57% by doctors. Life expectancy was about 52 years since the State's crude death rate averaged 16 deaths for every thousand people in the State. Infectious diseases were rampant in the State with the mortality rate from such diseases being 326 deaths for every 100,000 population. Of the infectious diseases, several ranked in the leading causes of death. Following is a listing of mortality rates per 100,000 population for selected causes of death:

TUBERCULOSIS		191
INFLUENZA/PNEUMONIA		156
ACCIDENTS		90
Motor Vehicle	*26*	
Other Accidents	*64*	
DIARRHEA & DYSENTERY		90
HEART DISEASE		87
DISEASES OF EARLY INFANCY		68
NEPHRITIS		57
CANCER		51
CEREBRAL HEMORRHAGE		47
PUERPERAL		23
APPENDICITIS		14
HOMICIDE		14
SUICIDE		10
CONGENITAL MALFORMATIONS		9
ARTERIOSCLEROSIS		6
BRONCHITIS		4

1939 Though the State's infant mortality rate had been reduced by over 25% , the rate of 104 infant deaths per thousand live births still ranked highest in the nation. The stillbirth rate had decreased to 27 per thousand live births, and the maternal mortality rate had dropped to 510 per 100,000 live births; however, the State birth rate had risen slightly to 30 births per thousand population. Intensive sanitation, immunization and education measures effected a 52% decrease in mortality from the infectious diseases. A mortality rate of 16 deaths per 1000 population existed in 1939. This decrease is reflected in the leading causes of death. Although showing decreases in New Mexico's mortality for such causes as tuberculosis, etc., still greatly exceeded national levels:

HEART DISEASE		125
INFLUENZA/PNEUMONIA		117
ACCIDENTS		98
Motor Vehicle	*44*	
Other Accidents	*54*	
TUBERCULOSIS		81
DISEASES OF EARLY INFANCY		71
CANCER		61
DIARRHEA & DYSENTERY		59
NEPHRITIS		49
CEREBRAL HEMORRHAGE		47
PUERPERAL		15
SUICIDE		15
APPENDICITIS		13
HERNIA & INTESTINAL OBSTRUCTION		11
CONGENITAL MALFORMATIONS		10
ARTERIOSCLEROSIS		7
HOMICIDE		5
BRONCHITIS		2

1949 Infant mortality in the State had been more than halved in the last twenty years. In 1949, the infant mortality rate in New Mexico was 65 infant deaths per thousand live births. Of infant deaths, the rate for the neonatal period (less than 28 days of age) was 32 deaths per thousand live births, and for the post neonatal period (28 days but less than one year of age), 33. Stillbirth mortality was down to 17 stillbirths per 1000 live births, and maternal mortality had decreased by 83% in twenty years to 130 maternal deaths for every 100,000 live births. The State birth rate of 33 births per 1000 population reflected the "baby boom" of the post-war years. 70% of births now occurred in a hospital. Only 5% of the births were now unattended. The number of practicing midwives had decreased from 768 in 1939 to 248 in 1949, and these attended 9% of the births that year, as more and more births were being attended by physicians. The crude death rate was down to 9 deaths per 1000 population, and while mortality from such causes as tuberculosis had decreased, the decreases were well below those occurring ~~natally~~ maternally. As the infectious diseases were being controlled, a shift in causes of death began to occur.

HEART DISEASE		165
DISEASES OF EARLY INFANCY		89
CANCER		81
ACCIDENTS		78
Motor Vehicle	*34*	
Other Accidents	*44*	
TUBERCULOSIS		57
INFLUENZA/PNEUMONIA		49
VASCULAR LESIONS		44
CONGENITAL MALFORMATIONS		18
NEPHRITIS		11
ARTERIOSCLEROSIS		10
SUICIDE		8
HOMICIDE		7
HERNIA & INTESTINAL OBSTRUCTION		7
APPENDICITIS		5

1959 New Mexico's 1959 infant mortality rate of 33 infant deaths per 1000 live births represents an almost 50% reduction since 1949, as neonatal mortality decreased to 23 per 1000 live births and post-neonatal mortality to 11. Stillbirth mortality was further reduced to 13 per 100,000 live births, and maternal mortality decreased to 53 maternal deaths per 100,000 live births. The State's birth rate decreased to 32 births per 1000 population, but was the highest in the nation. 90% of all births occurred in a hospital, and the percentage attended by midwives decreased to 2%. The decrease in births attended by midwives reflects not only the trend toward hospital/physician attended births, but also the decreasing number of practicing midwives (139 in 1959) as older ones died and fewer replacements came forward to join the ranks. Life expectancy had reached 68 years in the State as the crude death rate dropped to 7 deaths per thousand population. With the control of infectious diseases, chronic diseases began to settle in as leading causes of death. Accidents remained a serious problem in New Mexico, however, motor vehicle mortality was now higher than mortality from other accidental causes. The increase in mortality for some causes, such as con-

genital anomalies may reflect improved reporting rather than an increased incidence:

HEART DISEASE		160
CANCER		84
ACCIDENTS		83
Motor Vehicle	*42*	
Other Accidents	*41*	
VASCULAR LESIONS		55
CERTAIN CAUSES IN EARLY INFANCY		38
INFLUENZA/PNEUMONIA		27
CONGENITAL MALFORMATIONS		17
SUICIDE		10
TUBERCULOSIS		9
HERNIA & INTESTINAL OBSTRUCTION		7
HOMICIDE		6
APPENDICITIS		1

1969 The State's birth rate, though remaining one of the highest in the nation, decreased to 21 births per thousand population. Only 2.3% of births were not occurring in a hospital. Maternal mortality was down to 23 maternal deaths per 100,000 live births, while fetal mortality (*stillbirth*) had also decreased and the rate was now 12 fetal deaths per 1,000 live births. Further decreases had been effected on in fant mortality in New Mexico. The rate was now at 24 infant deaths for every thousand births. Decreases were noted for both components of infant mortality. The neonatal mortality rate was now at 16 deaths per thousand live births, and the postneonatal rate at 8. The neonatal rate was now about half what it had been twenty years earlier, while the postneonatal was less than a fourth. The State's crude death rate fluctuated around 7 deaths per thousand population. The mortality rate from infectious diseases decreased 96% since 1929, to a rate of 13 per 100,000 population in 1969. Chronic diseases were now the major killers, however, in New Mexico, accident mortality remained very high compared to the national figure, and motor vehicle mortality continued to increase, as did suicide mortality:

HEART DISEASE		184
CANCER		101
ACCIDENTS		88
Motor Vehicle	*49*	
Other Accidents	*39*	
CERREBRO VASCULAR		62
INFLUENZA/PNEUMONIA		42
DISEASES OF EARLY INFANCY		29
BRONCHITIS/EMPHYSEMA/ASTHMA		18
SUICIDE		15
CONGENITAL MALFORMATIONS		11
ARTERIOSCLEROSIS		9
HOMICIDE		7
TUBERCULOSIS		3
DIARRHEA & DYSENTERY		3
NEPHRITIS		2
APPENDICITIS		.7
PUERPERAL		0

1979 Slightly over 93% of all births were now being attended by a physician as the number of practicing midwives in the State had decreased to about 31. Only 1.5% of births were now occurring out of a hospital. Overall the State's birth rate had decreased slightly to 20 live births per thousand population. Eight fetal deaths were occurring for every thousand live births, and though in 1979 the number of maternal deaths increased notably to 10 (*a rate of 40 per 100,000 live births*), the average for the prior four years had been 2.5 maternal deaths. Since the neonatal mortality rate was nearly halved in the past 10 years, the State's infant mortality decreased to 14 deaths per thousand live births. The neonatal component was down to 8.8 deaths per thousand live births, and the postneonatal mortality rate had decreased to 5.4. Life expectancy in New Mexico had reached 72 years. Although New Mexico's crude death rate of slightly less than 7 deaths per thousand population is below the national rate, age-adjustment of the rate to compensate for the State's young population structure reveals a higher mortality for New Mexicans than nationally. The mortality rate from infectious diseases had further decreased to 7 deaths per 100,000 population. Chronic diseases are the leading cause of death. Accident mortality remains high for although a decrease in mortality is noted for accidents other than motor vehicle, motor vehicle mortality in New Mexico is second highest in the nation. Suicide mortality has reached the highest level ever in New Mexico and death from homicide has also increased. Mortality rates per 100,000 population for selected causes are as follows:

HEART DISEASE		161
CANCER		133
ACCIDENTS		78
Motor Vehicle	*48*	
Other Accidents	*30*	
CERREBRO VASCULAR		46
CHRONIC OBSTRUCTIVE PULMONARY DISEASE		30
SUICIDE		20
INFLUENZA & PNEUMONIA		19
DISEASES OF EARLY INFANCY		16
HOMICIDE		14
ARTERIOSCLEROSIS		10
NEPHRITIS		6
CONGENITAL ANOMALIES		5
HERNIA & INTESTINAL OBSTRUCTION		2
TUBERCULOSIS		1
DIARRHEA & DYSENTERY		.7
APPENDICITIS		.2
PUERPERAL		0

Public health efforts in the areas of prevention through immunization, sanitation and education efforts have decreased mortality from infectious diseases, though occasional outbreaks remain as a reminder of the danger of relaxing these efforts. Prenatal, maternal and child health services have effected decreases in infant, maternal, and fetal mortality, greatly improving pregnancy outcome in the State. Further improvements are possible.

The challenges of the future are the chronic diseases, accidents, and occupational and environmental hazards to health. Life expectancy in the State has increased markedly since 1929, due mainly to the control of infectious diseases, and decreased mortality in infancy. The challenge to increase life expectancy will become more difficult, for now decreases in chronic disease will need to be effected and this will require a change in attitude and life style through education, as well as requiring screening efforts; but then, public health effort has met such challenges before and won.

The marked reduction in mortality by age group is presented in Table 1. Decreases in mortality in childhood are most notable. Data indicates a recent

increase in mortality of young adults in their twenties, and mortality for those in their thirties is slightly higher than it was some 20 years ago.

While indicators such as life expectancy and mortality rates do reflect efforts of disease prevention -health promotion programs another effort, perhaps much more difficult to measure, but which must be strived for in spite of the inability to quantify the effects of these efforts, is that of functional capability. No matter what gains in life expectancy are made, the quality of that life, the level of functional capability maintained during that life, the minimization of illness and of the disability of chronic illness, are a major and pressing component of public health efforts in the State's future.

TABLE 1
New Mexico Resident Deaths
Mortality Rates by Age Group

AGE	1930	1939	1949	1959	1969	1978*
1-4	1228.4	564.6	294.1	159.8	109.7	79.8
5-9	265.0	148.7	101.1	50.4	39.4	28.3
10-14	243.8	127.5	99.8	54.1	36.6	33.1
15-19	452.0	267.2	168.1	139.0	165.5	83.2
20-29	794.2	390.4	232.6	194.2	219.8	239.1
30-39	798.8	526.7	317.0	223.1	266.8	229.4
40-49	1169.2	867.6	608.2	469.5	470.7	394.5
50-59	1708.7	1402.1	1150.6	957.7	1010.5	917.7
60+	5755.3	5276.7	4364.7	4085.6	4076.7	3958.5

*Rates per 100,000 Population 1978 Provisional

SPECIAL FEATURE
PUBLIC HEALTH IN NEW MEXICO 1919 - 1979

While it is the intent of this feature to provide some historical background of the public health effort in the State, it makes no pretense of being a history of public health in New Mexico, lacking both volume of presentation and minute detail of research to attain such a classification. Its intent then, is to provide the reader with a general background of public health in the State, especially of the early beginnings, and to impart to the reader a sense of the "changing times" during the sixty some year course of public health efforts in New Mexico.

* * * * *

The time was ripe for the establishment of a department of health in New Mexico. World War I and the Spanish influenza epidemic made evident the great need for such a department, and several reports served to emphasize this need. And then there was John Tombs. John Tombs came to New Mexico with the great flow of people coming to the State in search of relief from tuberculosis. He devoted himself to the fight against tuberculosis, and his energy and interest spread to the total health situation in the State. He launched a "public education" campaign spanning from 1917-1919, maintaining a constant media and appearance bombardment emphasizing health needs in New Mexico.

An outstanding accomplishment engineered by John Tombs, was the organization of the New Mexico Public Health Association on May 2, 1917. A major objective of the Association was to give every aid in the establishment of a state department of public health.

The American Medical Association made a comparative study of the various health departments. The results of the study showed New Mexico to be the only state in the Union without a public health department. Because of the lack of a public health department, New Mexico was missing out on federal funds for health needs. World War I further pointed to a need for a health department, as "too many young men were rejected by the draft boards because of physical conditions, and all too frequently, young men were being rejected by the Army because it was found that they were infected with tuberculosis".

The Spanish influenza epidemic hit New Mexico in late summer of 1918. The State was unable to cope with the medical emergency, nor did it even have the mechanism for evaluating the situation. At the request of Governor Lindsey, Surgeon J.W. Kerr of the U.S. Public Health Service arrived in New Mexico to make a survey of health conditions, and also to form an emergency health office to deal with the epidemic. The health survey was the foundation of the bill introduced into the legislature forming a department of health.

Although House Bill 118 carried the hearty endorsement of the governor, the medical associations, and many prominent citizens, it underwent amendments both in the house and the senate before it was finally passed by a 22 to 0 vote in the senate on March 14, 1919. The committee's substitute for House Bill 118 had unanimously passed the House of Representatives on March 8, 1919, and was signed by Governor Larrazolo on March 15, 1919. Since it carried an emergency clause, it immediately became law. With all its amendments, it remained an excellent health law; now remaining was implementation of the machinery for carrying out its design.

The first meeting of the State Board of Health was held on April 25, 1919. In addition to appointment of officers, the Board resolved to petition the U.S. Public Health Service for loan of an officer to organize and staff the newly created department and thereby, came Dr. C.E. Waller to New Mexico as the first commissioner of the department of health.

The second meeting of the State Board of Health was held on August 20, 1919. Dr. Waller presented the proposed administrative organization of the department creating the following divisions: vital statistics, preventable diseases, sanitary engineering and sanitation, and public health education. The proposed administrative plan was accepted by the Board. Harold F. Gray was appointed chief of the division of sanitary engineering and sanitation and Dr. George S. Luckett as chief of the division of preventable diseases.

The regulations proposed by Dr. Waller governing the reporting of births and deaths, the disposal, interment, disinterment and transportation of the dead, and the reporting of notifiable diseases were adopted by the Board.

At the third meeting of the Board on October 20, 1919, approval was given for the organization of the division of public health nursing, the division of child hygiene, and the division of laboratories. The Board also adopted regulations for the control of communicable diseases.

The Board held its fourth meeting on January 28, 1920. Regulations were adopted governing water supply, sewage disposal, sanitation of foods, and the prohibiting of common drinking cups in public places, and prohibiting the use of common towels in public places. Myrtle Greenfield was appointed chief of the division of laboratories, a position which she held until 1956.

At this point, the staff of the health department was comprised of four individuals. Needless to say, there was quite a diversification of duties. The state sanitary engineer notes in one report that in addition to making food, milk and water inspections, providing consultation on sewage disposal, mosquito breeding control, he also, during that period, assisted in a Caesarian delivery, and represented the department at county budget hearings throughout the State. Dr. Luckett, chief of the division of preventable disease also served as chief of the division of vital statistics until 1923, when Mrs.

P.M. Ruleau was appointed chief of the division of vital statistics.

Actual collection of certificates of birth and death began in the fall of 1919, but it would require ten years of intense effort before New Mexico would achieve 90% registration and thereby be admitted as a vital statistic registration state.

"Sanitation problems were numerous, colossal, and urgent. The milk supply was abominable, filthy, and infected. There was no tuberculosis or brucellosis testing of cows, and mastitis was common. If a milker was not too sick to stand, he worked, even if he had typhoid, diphtheria, or whatnot. There was no pasteurization of milk...

Water supplies ran from only moderately unsafe to highly polluted and dangerous. Generally, the well water supplies of cities were fairly safe, but the surface supplies were subject to contamination—some of it gross. Disinfection of water supplies using chlorination, was not practiced, and there were no water filtration plants...

One of the largest problems noted at the time was the use of polluted individual water supplies, small village wells, and water from irrigation ditches...Some improvements were made on a number of municipal water supplies, but in general, progress was slow...

Sewage disposal was a tremendous problem...most of the towns which had sewers, discharged into the nearest stream, if there was one; if not, into a dry arroyo. Where privies existed, they were primitive. Suprisingly enough, however, more progress was made on municipal sewage disposal than on any other phase of sanitation...Another problem that was noted at the time, in connection with sewage disposal, was the use of raw sewage for irrigating vegetables.

Anopheles freeborne were fairly numerous along most of the Rio Grande Valley. Malaria was found in the Mesilla Valley, around San Marcial, in the Belen area, and surprisingly enough, in the Espanola area at the then unprecedented elevation of nearly 6,000 feet...Diphtheria outbreaks were a great problem...

An influenza epidemic again hit New Mexico in the late winter and spring of 1920, a repitition of the severe epidemic of 1818. While the department knew what to do, the means with which to accomplish the purpose were very limited..."

Little was done about garbage collection and waste disposal by municipalities. Though food sanitation was needed, personnel limitations made it impossible to do much. The educational job confronting the small staff of the department of health was tremendous.

"In the detection of communicable diseases, the control of the purity of water and milk supplies, and other public health work, a diagnostic laboratory is essential." So, with a staff of one, the director of the laboratory - in a one-room laboratory, 7½ by 12 feet, the New Mexico Public Health Laboratory was established. The laboratory remained in quarters provided by the university until the years of overcrowding, increased staff, and workload resulted in a new building provided by the state department of health in October 1937.

The first specimen received in "the little laboratory with big plans" arrived in mid-February 1920. It was a culture to give aid in the diagnosis of diphtheria. The next specimen received was a sputum for the diagnosis of tuberculosis, and the third was a blood specimen to aid in the diagnosis of syphilis. The problems connected with these three communicable diseases constituted 65% of the laboratory workload for the first five years.

The laboratory's workload grew from about 3400 specimens the first year, to 7800 the second year, to 10,600 the third year, and the numbers continued to increase. As more sanitarians were hired, the number of water samples received increased.

Dysentery and infantile diarrhea was a major health problem and one of the causes of the State's high infant mortality rate. The laboratory was able to prove, beyond a shadow of a doubt, that much of the dysentery was an infection produced by recognizable bacilli of the genus Shigella.

Undulant fever continued to be a major health problem. Brucella abortus produces Bang's disease in cattle, Brucella melitensis produces Malta fever in goats and sheep, Brucella suis produces abortus in swine; any of these strains may produce undulant fever or brucellosis in man. Tests were made on widely scattered heads of goats, and all but one herd was found to be highly infected. In every herd of dairy cows tested, reactors were discovered.

The State Board of Health had provided for the organization of the division of public health nursing. By the end of 1920, there were four public health nurses employed in the State.

The first nurse practice act to license nurses in New Mexico was enacted by the legislature in 1923. By 1930, the number of public health nurses in the State had only increased to 16. Every county in the State had at least one public health nurse by 1936. In all, 56 nurses were employed, and by 1940, the number had reached 78.

Though a division of public health education was one of the four original divisions created in 1919, it was not until 1937 that a director of the division of public health education existed. However, this aspect of public health had not been neglected. A massive campaign had been carried on since the very conception of a department of public health in the State. Every nurse, every sanitarian, every public health professional in New Mexico played a role of health educator, bringing to the people of the State, information and education regarding health, as well as motivation for lifestyle and living environment changes for a longer healthier life.

The State Board of Health, at the meeting held on March 27, 1920, adopted regulations prescribing prophylactic treatment for the prevention of infant blindness, and also a division of tuberculosis was

created. The April 30, 1920 meeting resulted in adoption of regulations governing the sanitation of public school buildings.

The first official budget for the Department of Public Health was for fiscal year 1921, and amounted to $16,700. For Fy 1922, the budget increased to $46,944.

Because of a dispute of what agency in the State should administer the funds made available by the U.S. Congress passage of the Shephard-Towner bill, the New Mexico legislature passed the Child Welfare Bill creating the Department of Public Welfare, composed of two bureaus: a bureau of public health and a bureau of child welfare. This organizational structure remained in effect until 1938, when once again, a distinct agency - a Department of Public Health - was recognized.

The first report of the director was for the biennum 1921-22. The report was signed by Dr. George Luckett who had become the director, upon Dr. Waller's departure in 1921. The following capsules of highlights from department annual reports, for those years for which reports are available, are presented, hopefully, to serve as indicators of "the changing times" during the course of the department's history.

1921-22: Health unit operations began in January of 1921 in Bernalillo, Chaves, San Miguel, Santa Fe, and Union Counties. Each health unit comprised of a health officer, a public health nurse, a sanitary inspector, and a clerk. By 1922, Eddy, Torrance, and Valencia Counties had been added. Torrance County was discontinued during 1922, but the number of units remained at eight, since a unit was initiated in Dona Ana County. A division of county health work chief was hired to coordinate the work in the county units. The Department hammered away at compulsory school vaccinations until over 20,000 vaccinations against smallpox were given. There was a great effort in the area of maternal, infant and school health by means of educational measures. The Division of Sanitatary Engineering and Sanitation induced several towns to build sewer systems or water works. Work on the pollution problem of the Animas River was a major factor in decreasing the high incidence of typhoid in San Juan County. Though registration of births and deaths began in the State in the fall of 1919, still by 1922 only 70% registration was being attained.

In 1922, the State Board of Health adopted 8 sets of new regulations, and completely revised four others. Regulations adopted concerned governing: operation of sewage treatment plants, sanitation of public campgrounds, prevention of infant blindness, protection of records of births and deaths, sanitation of construction camps, construction and operation of public swimming pools, qualifications of health officers, practice of midwifery, disposal, interment, disinterment, and transportation of the dead, reporting of notifiable diseases and accidents, reporting of births and deaths, control of communicable diseases.

1923-24: McKinley and Colfax Counties were added as fulltime county health units in 1924. Diphtheria outbreaks occurred in Torrance, Valencia and Sandoval Counties. Virulent smallpox outbreaks occurred in Curry, Valencia and Hidalgo. Over a hundred cases of dysentery occurred in Eddy County. Outbreaks of typhoid occurred in Taos, San Miguel, Grant and Guadalupe Counties. The typhoid outbreak in Guadalupe County resulted in the removal of the health officer for inexcusable neglect. Great emphasis was placed on administration of toxin-antitoxin as a prophylactic against diphtheria, on rural sanitation, and on improving birth and death registration. A test made by the Bureau of the Census to determine if New Mexico would be admitted as a birth and death registration state showed the State attaining less than 75% registration; 90% was required.

1925-1926: Malaria-bearing mosquitos were a growing concern in Dona Ana County and around Elephant Butte. Four outbreaks of typhoid, three of smallpox and one of diphtheria *(resulting in 27 deaths in Rio Arriba County)* were recorded. One smallpox outbreak had invaded three rural school districts before being recognized. The need for increased efforts in child hygiene was stressed.

1927-28: A growing malaria emergency existed in Dona Ana County resulting in the most extensive dusting of breeding pools and ditches in the world, up to that time. The State was hit by a serious outbreak of poliomyelitis in 1927 with 200 cases reported. The State University created a department of hygiene.

1929-30: Between 1919 and 1929 diphtheria cases dropped 73%. Smallpox cases reported decreased 74%. Laboratory specimens examined rose 350%, available funds increased from $18,000 to $104,000. Laboratory staff increased from one part-time employee to 2 full-time and 3 part-time employees, and the number of public health nurses employed increased from 4 to 35. The percentage of the State's population served by fulltime county health units reached 41% in 1929, and only 3 counties were without some type of public health nursing service in 1930.

Eight towns adopted the Standard Milk Ordinance in 1929. The position of State Registrar was created in 1928. In 1929, after ten years of effort, New Mexico attained 90% registration of births and deaths and was admitted into the U.S. vital statistic registration system.

Heavy flooding in the Rio Grande valley, above and below Socorro created emergency situations for typhoid vaccinations.

That the economic value to the community of preventative measures far exceeded the cost of such measures was becoming apparent as malaria control efforts in Dona Ana County were producing not only obvious reduction of mosquito breeding, but the corresponding reduction of infection.

1931-32: There was great emphasis on promoting the

adoption of the Standard Milk Ordinance and the comparative ratings of milk suppliers. Another venture involved the stocking of minnows in various drains and ditches for the purpose of mosquito control. These were stocked in almost every drain in Sierra and Dona Ana Counties, every swamp in the Espanola valley, and were also transported to San Juan County.

The number of public health nurses employed had grown to 32. Local radio stations were used as a tool in public education measures. There appears in the report for this year, the first recommendation advocating districting the State for health purposes.

1933-34: The results of two surveys became available during this period. The reports "Health Survey of New Mexico" by Dr. Carl Buck, field secretary of the American Public Health Association, and "Syphilis in New Mexico" by Dr. Walter Clarke, medical director of the American Social Hygiene Association, pointed to many health problems remaining in the State. There were 10,000 or more cases of tuberculosis in the State, and at least 75% had lived in the State for more than four years. There was no provision made for the care of the indigent tuberculous. Of the 21,000 cases of syphilis in the State, only 1,000 were under medical care. 75% of the population used privies for human waste disposal and less than 10% of those were flyproof. *"Is it any wonder that New Mexico leads the United States in its death rate for diarrhea?"*

Enforcement of the State law requiring the vaccination of all school children against smallpox has resulted in a gradual reduction in the number of cases reported each year since 1930... *"practically all the smallpox that we have in the State can be definitely traced to cases coming from adjoining states..."*. In spite of the immunization against diphtheria, the number of cases reported gradually increased from 364 in 1929 to 673 in 1932, then dropped to 385 in 1933. *"It would seem that we are beginning to see the results of intense immunization campaigns, health education in general, and more efficient reporting"*.

Typhoid fever remained one of the most difficult health problems. Malaria, a big problem in Dona Ana County, was becoming quite a problem in other couties. Mosquito control efforts were effected in Dona Ana, Santa Fe, Rio Arriba, Mora and San Juan Counties.

Every county in the State, with the exception of Taos and Quay, had a public health nurse. An audiometer was purchased for use in the various counties. The laboratory examined over 80,000 specimens. Through efforts of the State Bureau of Public Health and the New Mexico Educational Association, a health and physical education program was organized as a functioning unit of the New Mexico Educational Association. Plans were received and approved for seven water supplies, four sewage works, and two swimming pools.

1935-36: The 1935 legislature passed the District Health Act resulting in the establishment of ten health districts in New Mexico as of July 1, 1935, and provided for a fulltime staff in each district. The passage by the national congress of the Social Security Act in 1935 reacted with the State's new law to mutual advantage. *"The State law has made possible the rapid and efficient development of public health work aimed at by the federal law and as a direct result, New Mexico is one of a small group of states that could claim the full subsidy for public health work and put it immediately to work."* In 1936 New Mexico collected over $139,000 in Title V and VI monies.

A steady increase in the number of typhoid cases reported was noted. It was estimated *"approximately 3% of typhoid cases become chronic carriers and remain so for the rest of their lives."* Tuberculosis continued to be one of New Mexico's most important health problems... *"the native population is likely to come in contact with imported cases and consequently runs grave risks in contacting the infection"*. Tuberculin testing was carried out in various parts of the State.

Besides its usual workload, the laboratory cooperated with the Bureau of Animal Industry in the control of Bang's disease among cattle and goats. Complete new water systems were constructed in three cities, while improvements and extensions were made in seven other cities. Chlorination equipment was installed at Carlsbad, Las Vegas and Santa Fe. New sewage systems were completed at Hagerman, Taos and Espanola. Sewage treatment plants were completed in three more cities. Sixteen cities had now adopted and were operating under the provisions of the Standard Milk Ordinance. A motion picture entitled "Malaria in New Mexico" was produced and used in public education efforts. A statewide pit toilet project using W.P.A. labor began March 1, 1936, employing 339 men in 22 counties. By December 1, 7,332 sanitary toilets had been installed. A State epidemiologist was hired February 1, 1936.

Some early work on dysentery was done in New Mexico by Dr. Hardy of Columbia University, and Dr. Watt, U.S. Public Health Service. Their efforts confirmed the fact, already reported by he State laboratory, that what had plagued New Mexico under the names "Rocky Mountain Dysentery" and "Santa Fe-itis" was in fact a bacillary dysentery, principally of the Flexner and Sonne types. Further investigation show that flies were the principal carriers.

Certain appropriations under the Social Security Act were made available to the states through the Public Health Service, specifically to enlarge and improve the programs for mothers and infants. This was quite beneficial to New Mexico, since in some areas of the State, children 1 through 10 years of age comprised a third of the population. This type of work had not been neglected in the State. In the very early stages of the State Department of Public Health, the problem of maternal and child health care had been recognized, and a section called child hygiene had been formed. There had been no director and the

responsibilities had been carried on under the direction of the nurse supervisor. A director was appointed with the formation of the Maternal and Child Health Division organized in July, 1936. Plans were made for increasing the number of public health nurses and clinics in order to reduce the State's very high maternal, infant and fetal mortality. Their efforts were aimed at combating conditions created by the rural nature of the State, the small number of physicians for so large a State, and the generally very low incomes. A major aspect of the task was one of education—educating the midwife, the mother and the child. *"To make the most of the child's potentialities for health and well-being, it is important to influence his environment from the very beginning...(and his) as yet unfixed habits."*

1937-38: The staff was enlarged by addition of personnel to undertake specific activities, the necessity for which had long been recognized and carried on to the extent possible by existing staff. Appointed were a director of health education in 1937, a school health consultant in 1938. While the position of health educator was sporadically filled and vacated, as budget dictated, the concept of health education was strong in every public health effort.

"It is evident that the outstanding need in New Mexico is for more sanitation. Unsanitary conditions which in other states are confined to rural areas, prevail in New Mexico in both rural and urban areas...The public must be made to demand sanitary surroundings, and be willing to pay for them."

A steady decline in the incidence of typhoid fever was noted and was an inspring note, for such a disease is definitely reflective of preventive measures. Diphtheria incidence had decreased, and although tuberculosis continued to be a major problem, progress was being made.

Modern sewage treatments had been completed, or were under construction in Albuquerque, Santa Fe, Carlsbad, Hobbs, Clovis, Fort Sumner and Aztec. Nineteen cities were presently operating under the Standard Milk Ordinance. Eleven counties in the State had areas in which malaria-carrying mosquitos were known to be present. Control project were sponsored in each of these counties for eliminating mosquito breeding areas either by draining or filling swampy area. 384 men per month were employed in this project. The Division of Vital Statistics acquired a "Dexigraph Camera" to help meet the increasing demand for certified copies of birth and death certificates.

Two surveys were conducted during this time. One survey showed that of the water supplies of 157 communites of considerable size, 35 had water containing flouride definitely above the danger point of .9 parts per million; 22 communities were borderline. A survey of 728 schools indicated that only 38% had toilets meeting department requirements; only 48% had a safe water supply; 26% had buildings that could be rated as well lighted, and only 43% had buildings rated as being in adequate physical repair.

A midwife consultant was appointed in May 1937 to instruct the nearly 800 midwives on the importance of cleanliness, non-interference, recognition of abnormal conditions, use of silver nitrate, and filling out the birth certificate.

The State Public Health Laboratory moved into a new building at a cost of $57,000 for building and laboratory equipment. The official dedication took place November 18, 1937, while without interruption of the proceedings, or realization by the guests, laboratory staff handled a critical situation, an outbreak of botulism in Tucumcari. The laboratory quickly determined the source as being home-canned green chili, but it was almost ten o'clock that night before the toxin could be identified as type A. Nine individuals died, but 11 receovered due to administration of the proper antitoxin based on the lab's findings.

The 1937 legislature dissolved the Department of Public Welfare, once again creating a Department of Public Health as had existed prior to 1921 legislation which had merged the Department of Health and the Department of Child Welfare. A basic health law, updated from that of 1919, was reenacted.

A Division of Venereal Disease Control was established through funds made available through the federal Venereal Disease Control Act (as amended in 1938). Twenty diagnostic and treatment centers were established throughout the State.

1939-40: The director's report stressed a number of unsolved problems in the field of public health still facing the department: dental care and dental education, the tuberculous individual, diseases of middle and advanced age, cancer, heart disease, diabetes, etc., social problems, the hard-of-hearing child, and the need for statistical studies for charting the public health program of the State.

A pneumonia control program was established on January 1, 1940. Seven pneumonia control stations were established. A statewide cancer control program was also started. The program was largely educational in character.

The first mention of plague is made during this period. Wild rodents, especially prairie dogs, were dying in large numbers in western Catron County. Examination by scientists from the San Francisco Plague Laboratory found the animals to be suffering from Sylvatic Plague.

The position of nutrition consultant was established. Some of the first efforts were in the area of nutrition for expectant and nursing mothers. A nutrition council was also established in 1940.

Health education workshops and publications were developed for teacher education in the State. A sound truck with motion picture apparatus was acquired for health education purposes as well as for training of staff.

A statewide milk regulation was passed by the State board of public health, which required the compulsory testing of all dairy cattle for Bang's disease

and also the requiring of cover-capping of all grade A pasteurized milk.

The number of nurses employed increased to 78 by 1940. New Mexico ranked second highest in public health nurses having a course of a year or more in public health nursing, and fourth highest of all the states in the number of public health nurses having college degrees. The Division of Vital Statistics was confronted with an immense demand for delayed birth certificates and issuing of certified copies because of demand for proof of citizenship.

"The State Public Health Laboratory reported reported that the animals of the State were infected with rabies to such an extent that it might almost be called an epidemic. Never before had so many animals been reported as infected. The greatest amount of known infection was found among dogs, but many wild animals were doubtless infected and might serve as a reservoir which perpetuated the infection of rabies in the State." Other animals examined and found rabid were cows, cats, coyotes, skunks, chipmunks, goats, sheep, burros, horses, squirrels, rabbits, and chickens. During 1940, one human death from rabies occurred in the State.

1941: Rabies in animals showed a steady increase, with 125 cases among animals and two human cases in 1941. Areas of the State were placed under quarantine against dogs running at large. An unusual communicable disease was the reporting of two cases of relapsing fever in Lea County. The disease is disseminated by certain ticks; the particular species of ticks which carry relapsing fever were found in Chaves, Hidalgo, Lea and Roosevelt Counties. A survey by the Public Health Service found organisms of plague from prairie dogs in many areas of New Mexico. Education regarding nutrition was made available through every outlet possible. Night shifts were required in the Division of Vital Statistics to meet the immense demand for certified copies of birth certificates and for filing of delayed birth certificates.

A new activity of the Division of Sanitary Engineering and Sanitation was the attention given to the sanitation of public camp grounds, with attention being given to heating and ventilation. Of the 700 public tourist camp grounds inspected, 85% of the campgrounds and hotels had gas heating equipment which did not meet the reguirements of the regulations adopted by the State Board of Public Health. Another new activity of the Division in 1941 was the attempted enforcement of regulations governing the storage and handling of liquified petroleum gas.

The statewide WPA PIT Toilat Project, sponsored by the Department of Public Health, ceased to operate July 15, 1941 due to the rising costs of materials and the shortage of labor. During the course of the project, over 17,000 pit toilets had been constructed in 26 of the State's counties.

The Standard Milk Ordinance was adopted in two more cities, and for all of Chaves County (because of the Army Air Base). Two new pasteurization plants were obtained at Las Cruces. Milk sanitation was a major theme of the department's exhibit at the State Fair.

The Division of Venereal Disease Control, which had been funded under the provision of the Federal Venereal Control Act, for the first time received a state appropriation in 1940-41.

1942: *The pneumonia control program continued its* efforts as the number of control stations had been increased to 13. The effectiveness of the smallpox vaccination campaign, now conducted for many years, was evidenced by the fact that only four cases of smallpox were reported in 1942.

For the first time in its history, the department was provided with the services of a full-time dental consultant. Certificate issuance reached unprecedented demand because of the declaration of war. In spite of the workload, the Division of Vital Statistics issued for the first time, a printed bulletin of statistical figures, and laid the groundwork for registration of vital events of Indians.

In 1942, the State Health Laboratory no longer had the responsibility for performing tests for detection of Bang's disease for the Bureau of Animal Industry. This responsibility was shifted to the bureau's lab. The war years had, however, brought a large increasing workload in the area of venereal disease control for the Public Health Laboratory.

Complete sanitary surveys made of 19 of 60 public water supplies listed with the department showed that of the 19 examined, only two were found to be completely satisfactory. An examination of sewage treatment plants showed a general neglect in operation and a need for closer supervision by the engineering division. 21 communities had adopted the Standard Milk Ordinance.

1943: The national increase in the incidence of poliomyelitis was reflected in the reporting of 77 cases of the disease in New Mexico, this being the largest number reported for the State since 1929. Increases were noted in the incidence of tuberculosis and brucellosis, while decreases were recorded for diphtheria, rabies and typhoid.

Regular working hours were resumed in the Vital Statistics Division since the peak year of requests for certified copies occurred in 1942. Issuance would remain at high levels, however, now that the need for certified copies had been established. New regulations regarding the filing of a new birth certificate for adoption cases, legitimation of births by subsequent marriage, registration of foundlings, and corrections of original certificates on file were promulgated by the State Board of Public Health on July 6, 1943. The registration of Indian vital statistics began in 1943.

One of the greatest problems faced by the Division of Nursing in 1943 was loss of personnel. At no time during the year did the State possess more than 2/3 of the 54 nurses allotted. Reasons for resignations included: military service, better paying positions, inability to secure a car or inability to secure suitable living facilities. The highest paid nurse's

salary was $150.00 per month.

A tuberculosis clinic was established in Albuquerque and three field nutritionists were added to the department. The activities of the Division of Sanitary Engineering and Sanitation during 1943 were geared toward a reorganization and standardization of water sampling, milk and food inspections, and the use of forms and reports. The staff was augmented by two new members, an associate engineer and a supervisor of food sanitation.

With the appointment of a full-time supervisor of food sanitation on August 9, 1943, a coordinated food and drink handling sanitation program for the State was inaugurated. A schedule was established for making sanitary surveys of eating and drinking establishments. Surveys completed by the end of 1943 showed *"no establishments were found that complied with all the requirements of the State Regulations Governing the Sanitation of Food and Food Handling Establishments. The compliance with the regulations ranged from 50% to 67%..."* Most of the violations were due to carelessness.

At least one inspection of every transient sleeping accommodation was made in 1943, with special attention given to gas heating units. Active enforcement of the regulations on liquified petroleum gas was attempted for the first time in 1943, but only limited compliance was secured due to the long period of unrestricted operations. The most serious concern encountered was the use of unapproved tanks and containers.

In 1943, there was a start made in a program of rodent control, stimulated partly by the knowledge that sylvatic plague infection had been discovered in the field rodents of New Mexico and partly by the knowledge that typhus fever was endemic in Texas.

No State regulations applied specifically to garbage and filth control, but it was felt the time was not ripe to press the issue. Practically none of the swimming pools operating in New Mexico had been designed to permit safe operation. An attempt was made to maintain proper chlorination levels of all pools. The report of the Division of Sanitary Engineering and Sanitation for 1943 closed with the following remark: *"Past laxness in the strict enforcement of our regulations is now having its inevitable consequences. It is most difficult for the violator that the regulations must be enforced now, when the same violations have long gone unchallenged. There is a decided tendency by violators to take enforcement as personal affront and to alibi and contest the findings of the inspector. The difficulties now being experienced would perhaps, upon first thought, be reason to relax the regulations. If public health is to be maintained we must, on the contrary, be more diligent in securing compliance with our regulations."*

With funds from a special grant, a Venereal Disease Intensive Treatment Center was established. The center operated until June 30, 1951, when lack of funds forced termination of services. Increased State appropriations for venereal disease control were also made available to the department, and 36 venereal disease clinics and treatment stations were maintained throughout the State.

At the beginning of 1943, the Department of Public Health consisted of 191 full-time positions. Turnover was heavy during the year, especially in the professional/technical classes.

1945: *"During the year 1945, the Public Health activities in New Mexico were at a low ebb due to the inability to secure properly qualified personnel to fill public health positions, particularly those of public health nurses."*

The year witnessed the inauguration of the Tuberculosis Control Program. In several counties, case registers for tuberculosis were set up. The number of tuberculosis cases showed a marked increase from 1313 in 1944 to 2909 in 1945. Of these 2909, 19% originated within the State.

The increased number of individuals immunized against diphtheria was due in part to passage of the law by the legislature that all children attending public schools below a certain age limit must be immunized against diphtheria. Typhoid immunizations showed a marked drop during 1945 due chiefly to lack of personnel.

A nurse-midwife demonstration project was inaugurated at El Rito and Abiquiu during 1945. Vacancies occurred in all positions of the nutrition staff resulting in marked reduction of services rendered.

A milk survey performed in the State showed that only 28% of all milk supplies sampled met the bacterial limits established by the Standard Milk Ordinance. The survey results indicated need for much more work in this area, but with so many areas of need, the sanitarians could not give sufficient time to each area. Under the heading of Food Sanitation, a survey conducted involving examination of the eating and drinking utensils of 531 establishments indicated that, even allowing the maximum permissible of 500 organisms, only 23% of the establishments were within the legal maximum. Both surveys showed these poor conditions existing more or less uniformly spread over the State.

In an effort to improve food handling practices in New Mexico, a School for Food Handlers was developed and held at Lordsburg. The need for more sanitarians to cope with the vast rural sanitation problem in the State was evident and growing. Streams and watersheds were becoming more heavily contaminated as the population of the State continued to increase.

1946: The year 1946 witnessed the beginning of a Cancer Control Program for the State. The program was set up to include: reporting of cancer cases, establishment of cancer detection centers, establishment of treatment clinics, compilation of statistical data, case follow-up, and educational work. The Papanicolaou Technique for the cytologic diagnosis of cancer was demonstrated to the central office and medical groups.

Poliomyelitis was epidemic through a very large part

of the nation, and New Mexico participated in this increased incidence. The laboratory also experienced an increased number of specimens for the diagnostic control of syphilis, nearly 53,000 specimens in 1946. Because of budget restraints, the registration field agent position in the Division of Vital Records was abolished. This was a definite loss since the position had played such an important role in securing and maintaining registration of vital events. A beginning of the program to supply incubators to various hospitals on permanent loan, particularly in connection with the care of premature infants, was made during the fiscal year 1946 - five hospitals being supplied with one incubator each.

The year 1946 witnessed the establishment of a separate Division of Tuberculosis Control. The mobile x-ray unit was put into operation and x-rays offered to State employees; then the unit moved to Bernalillo County to begin a mass x-ray survey.

The work of the Division of Hospital Survey and Construction was inaugurated following the passage of Chapter 202, Laws of 1945, which provided for *"the surveying of hospitals, public health centers, and for planning construction of additional facilities, and to accept grants of money from the United States Government, and making appropriations."* The monies being referred to were those of the Hill-Burton Bill passed by the U.S. Congress. The Governor appointed a 12 member hospital advisory council and $10,000 was made available to carry out the hospital survey.

1947: The Cancer Control Program initiated a card index register for registering cases, and much educational material had been distributed. The Public Employees' Retirement Act was passed by the legislature, and the State Employees' Retirement Association came into being.

In spite of a very marked drop in mortality from diarrhea and enteritis, the rate was still very much in excess of the rate for the nation as a whole, indicating a need for more sanitation as applied to water supplies, food supplies, and excreta disposal.

The State Department of Public Health on August 4, 1947, promulgated the nurse-midwife regulations and on November 5, the first nine applicants for licenses to practice nurse-midwifery in New Mexico were granted these licenses. It is believed that New Mexico was the first State to issue nurse-midwife licensure credentials. A seminar was conducted on "Public Health Nursing for Poliomyelitis" and 1947 also saw the publication of a school health manual.

Although the staff of sanitarians was only at half strength, because of vacancies, advancements were made. The number of pasteurization plants in the State increased from 32 to 41. An industrial hygiene survey for the State was conducted. The survey disclosed that 80,535 persons were employed by industry in New Mexico. Follow-up study was planned in order to closer examine the working conditions existing in these various industries. A great need of sanitation in New Mexico was for trained operators of sewage disposal plants.

The mobile unit of the Division of Tuberculosis Control conducted a mass survey involving several counties, and resulting in nearly 64,000 films being taken. Case registers were established in Lea, Eddy, Chaves, Dona Ana, and Otero Counties.

The Division of Hospital Survey and Construction published "New Mexico State Hospital Survey Report", and a state plan for hospital construction.

Full-time personnel of the department reached a total of 220 at the end of the year.

1948: Four cancer detection centers were established in the State. Information on the Papanicolaou Technique was made available to many physicians.

New regulations governing the preservation, disposition, transportation, interment and disinterment of dead human bodies were promulgated by the State Board of Public Health on March 6, 1948 and put into effect May 1, 1948. A new standard form of birth, death and stillbirth certificates were printed for use beginning January 1, 1949.

A mobile health laboratory unit was put into operation. This unit was to confine its efforts to standard bacterial counts of milk samples, and standard surface counts of food utensils.

Immunizations were emphasized, especially those for smalpox, diphtheria and whooping cough. A program of vision and hearing testing was established on a regular basis.

A dental trailer was purchased and fully equipped; however, it was found to be impossible to hire a dentist within the limitation of the pay-scale in force in the department.

With the passage by the 1947 Legislature of legislation authorizing the creation of small "Mutual Domestic Water Consumers' Association", the department began working with small unincorporated communities for the purpose of helping them obtain safe water supplies. In 1948, the first two associations were formed under this act, one at Los Apodacas and one at Tajique.

At the close of the year, almost 85% of all milk sold in New Mexico was pasteurized. The increased activity in establishing and extending public sewer systems lead to the progressive dimunition of private privies at least in "urban" areas. The industrial hygiene program surveyed the major mining activities in the State to uncover an estimate of hazards due to silicosis. Also surveyed were garages for carbon monoxide hazards. The Frozen Food Locker Law became effective in March, 1948, requiring an inspection of all frozen food lockers in the State prior to the issuance of a license. The 47 plants found in operation in New Mexico were inspected; none of these plants met all the requirements.

Tuberculosis case registers were established in seven additional counties, and two counties (Bernalillo and Santa Fe) were now operating chest clinics.

The Division of Hospital Survey and Construction

hired a part-time architect to scrutinize plans and specifications of hospitals to be built with Hill-Burton funds,and a part-time engineer to inspect construction.

1949: The occurrence of two cases of bubonic plague in humans in New Mexico, at the same time and in widely separated areas, drew national interest. It had been known since 1938, that wild rodents and other small animals in New Mexico were frequently infested with plague-infected fleas and that cases of bubonic plague in human beings could be expected. A total of six human cases were reported in the State for the year, giving impetus to a statewide education effort regarding the dangers of handling dead wild animals, and for control of domestic rodents. The problem would be one of rodent control and early diagnosis and treatment.

Many communities cooperated in efforts for garbage control. Several instituted the sanitary landfill methods of garbage disposal. A rodent control ordinance was adopted by the City of Albuquerque as a model for other communities. Chlorination of public water supplies had now reached all but a few of the major water supplies. Food handlers' schools were conducted in several cities. 57 frozen food locker plants were licensed. The supervisor of Industrial Hygiene conducted radiation danger measurements on 36 shoe-fitting fluoroscopes, of which nearly all the machines were capable of exposing the customer to excessive doses of radiation.

The hearing and vision testing program was introduced into seven more counties. The first two New Mexico hospital projects under Hill-Burton funds were completed and began rendering service—the New Gerald Champion Memorial Hospital in Alamogordo and an addition to Tucumcari General Hospital. Five other hospitals were under construction, and several more in the planning stages.

A new division of Mental Health was inaugurated.

1950: In the field of Sanitary Engineering and Sanitation, in order to meet demands for service, it was necessary to add two associate engineers and one additional milk sanitarian. The U.S. Public Health Service loaned a biologist for Plague Survey and a Mobile Plague Survey Laboratory, a supervisor for two insect control projects, and two more persons for fly control. This all helped to improve garbage collection, and disposal methods in many communities, and rat-proofing of food handling premises and other buildings. Mutual Domestic Consumers' Projects were completed in seven communities, while projects were under construction in another three. The State Department of Public Health was designated the official Water Pollution Control Agency under the Federal Water Pollution Control Act. New Mexico was divided into three major river basins. Two Water Pollution Control Surveys were made on the Pecos River. Five food-handlers' courses were held. Two cases of food poisoning, involving 160 persons were investigated. The extreme danger of parathion, and insecticide, occupied the attention of the Industrial Hygiene Division, with surveys of plants and visits to crop dusters. Fly Control Projects were inaugurated in Las Cruces and Carlsbad in an attempt to lower the number of cases of diarrhea and dysentery.

The first mention of education regarding breast cancer was made in the report for this year. A 16 mm sound film "Self Examination, Breast Cancer" was shown once in 1950 with an attendance of 10 persons. The Tuberculosis Control Division made chest surveys in five counties and several individual schools and communities. Thirteen New Mexico hospitals were assisted with Hill-Burton Funds.

A statement from "Report of the Director" was perhaps indicative of the changing times and of things to come—*"The Department realizes that the industrial applications of radioactive materials are increasing daily, and that it is merely a question of time until definite policies must be established for safeguarding the public from exposure to radiation through carelessness or ignorances."*

1954-55: The Division of Chronic Disease was established absorbing the Tuberculosis Division and adding heart disease and cancer programs. In the area of tuberculosis control, a mass X-ray survey of the whole State was conducted using two mobile X-ray units. Cancer control was an exceedingly difficult field to develop, however, emphasis was placed on the finding of chest tumors through chest X-rays, and on health education.

The Division of Communicable Disease consisted of a Venereal Disease Control Section, and an Epidemiology Section. Publication of a "Weekly Communicable Disease Summary" was begun. Data showed that New Mexico ranked sixth highest among the States in the incidence of syphilis and 25th highest for gonorrhea. A Typhoid Case and Carrier Register was established. With the development of the Salk Poliomyelitis Vaccine in 1953, in 1954 began a nation-wide Evaluation Trial Study Vaccination Campaign. In New Mexico, this resulted in the administerting of 52,000 first injections, 45,000 second injections, and 2,000 boosters to first and second grade children. With the assignment of a U.S. Public Health Service Veterinarian in March 1954, a Veterinary Public Health Program was initiated by the Division of Communicable Disease. A rabies survey of Carlsbad Caverns was conducted. An Animal Disease Reporting Program was initiated, and surveillance for brucellosis in dairy herds was conducted in cooperation with the Division of Environmental Sanitation.

The Division of Dental Health was in its second fiscal year of operation. This newly formed division consisted of dentist and driver-dentist assistant employed to man the mobile dental unit for providing services to pre-school, first grade, and second-grade children. New Mexico remained one of only four states without a program for scientifically controlled flouridation. A survey of the flouride content of community water supplies was being conducted. Indications were that about 50% of the

State's popluation was already receiving enough, if not too much, flouride in their drinking water. The four largest communities deficient in flouride were Santa Fe, Raton, Las Vegas and Taos. A law suit in Santa Fe was delaying adjustment of the flouride content of the municipal water supply there, and the ramifications of the legal action were being closely considered by other municipalities.

The Environmental Sanitation Services Division actively enforced requirements of the Milk Sanitation Act passed by the 1953 Legislature, and requirements for the installation and operation of the "Filled Milk Law" enacted by the 1951 Legislature prohibiting the use of foreign fats in dairy products. Grade A pasteurized milk was now available in all cities and towns in New Mexico, and practically all villages. Seventeen incorporated communities with populations of less than 2000 lacked refuse handling systems, and efforts were made for promoting programs in these communities.

A survey of two communities showed a steady decrease in the number of reported infant deaths due to diarrhea since intensive fly control measures had been started. Eight power spray machines and four vehicles were acquired by the Department for Emergencies and for loan to communities for control measures. Much of the ditching and drainage accomplished in the 1930s had broken down and plans were being contemplated for replacement. Enforcement of sanitation on hog farms was also stressed. Regulations governing the sanitation of trailer courts were adopted, and the regulations governing the heating and ventilation of tourist courts were revised. Also adopted were new "regulations governing the sanitary design, construction and operation of swimming pools." 79 public water supplies in incorporated communities of the State were supervised under regulations of the Department of Public Health. With the increased number of sewage treatment plants, the emphasis was on training of plant operators.

In the area of occupational health, several studies were compiled. Dust studies were made in one uranium mill, in 5 potash mines, in a perlite mill, and in a manganese mill and mine. Radon level determinations were made in the 11 underground mines operating in the State, and test results indicated exposure levels considerably above maximum permissible. A U.S. Public Health Service team made physical examinations of 85 (75%) of the State's uranium miners, and the miners were tagged for tracking over the years.

The division of Hospital Facilities was now composed of three programs. The Hospital Survey and Construction Section was responsible for Hill-Burton Review and Revision of the State Plan for Hopsital Construction, (the 6th Revision was published June 30, 1954). The licensure program was begun in 1951. The Medical Facilities Survey and Planning Program came into being because of Public Law 482 which amended the original Hill-Burton Act on July 12, 1954. This law appropriated funds for several categories not previously covered by Hill-Burton and made appropriation for survey within the State with respect to existing diagnostic or treatment centers, chronic disease facilities, rehabilitation centers, and nursing homes.

The Division of Health Education was very active through presentation of films, distribution of pamphlets, and through an increasing utilization of television. The Division of Health Nursing devoted much effort to the Salk Polio Vaccine Program.

Other programs receiving increased attention were School Nutrition, the "Accident Prevention Program" and the "Home Safety Program." Efforts of the Mental Health Division included educational, consultative, and clinical services. The Mobile Health Laboratory Unit which had been in service since 1948 was discontinued in 1954.

1956: Regulations were adopted governing the Sanitation of Meat Slaughtering Establishments. 63% of the State's population was drinking water containing at least optimum flouride. Use of the ABC Color Posters was being made in rating food establishments. An increased effort was made in enforcing the New Mexico Food Act. The Act passed in 1951 was in regard to adulteration, misbranding, and false advertising of foods. Also noted during this time was in the initiation of New Mexico Water and Sewage Work Schools.

A rabies outbreak in Santa Fe resulted in one human death. In July, 1956, a Division of Preventive Medicine was established. The Division consisted of four sections; Chronic Disease Control, Venereal Disease Control, Communicable Disease Control and Epidemiology.

1957: The existence of tremendous uranium ore deposits in the Ambrosia Lake area near Grants resulted in construction that gave New Mexico approximately 50% of the uranium milling capacity in the U.S. at that time. This created water supply, sewage disposal, mill waste disposal and general boom-town problems for the entire Grants area. The first mill waste water disposal problem had already resulted in pollution of ground waters, and required process changes costing around half a million dollars to eliminate such chemical pollution. 250 atmospheric radar daughter level determinations were made during the year. 396 uranium workers were given physical examinations and were scheduled to be re-examined in 1960. The Division cooperated in the National Radiation Surveillance Network. Loan was also made to dentists of dosimeters to measure their own exposure levels in the use of dental X-ray equipment.

Construction was completed and operation begun during the year, of a branch of the State Public Health Laboratory at Clovis for examination of milk and milk products. Plans were laid for poison control centers. A rabies case involving the first human in New Mexico to be bitten by a laboratory proven rabid bat occurred in September 1957. A glaucoma survey was conducted among relatives of diabetics. Public education efforts through leaflets, radio and TV

were mainly directed at the Asian flu. The Child Development Clinic was established in Santa Fe. The training of Navajos as VD investigators to work with Indians in northwest New Mexico was begun. The New Mexico premarital examination Law was passed in 1957. New programs such as polio vaccination seriously curtailed time for home nursing visits, but clinic visits increased. Services provided through clinics and conferences went on year in-year out. In 1957, 16,000 DPT immunications, and 13,000 smallpox immunizations were administered.

1958: *"Public Health encompasses those activities that are undertaken for the prevention of disease and the promotion of health... Helping to prevent the occurrence of the disease or preventing the illness and disability that the disease will later bring, is an area of work in which health departments will increasingly play an important role... Expenditures for sound preventitive programs are a drop in the bucket, when compared with the high cost of treating persons after..."*

In 1958 a Division of Gerontology to help meet the health needs of an increasing number of older citizens in the State was established. While 40 years ago infectious disease were the overwhelming problem, now, they were being replaced by chronic diseases. The Public Health Nurse (and staff in general) combined the functions of prevention and control of disease with health promotion through counseling, guidance and education. Much time during the year was devoted to cardiovascular disease prevention.

The Division of Mental Health published the "Director of Mental Health Facilities in New Mexico" and "Survey of Mental Health Personnel". A State Public Health Laboratory branch was completed during the year in Farmington, making a total of two branch offices. The State Laboratory had the additional responsibility of evaluating the 38 labs approved for premarital serologic testing required by the 1957 law.

In the past ten years, New Mexico had added 1800 hospital beds, still, only 43% of the need was being met in 1958.

More industrial waste problems were surfacing with the addition of 4 new uramium ore mills in the Ambrosia Lake area. The problems of disposal of oil brines was an increasing problem in Lea County oil fields. Studies of accidential X-ray exposure were continued. Major mosquito control efforts were required in the Rio Grande Valley. In Dona Ana County, a State of Emergency was declared, and mobilization of all available mosquito control resources was required. Demand for safe water supplies and disposal systems in rural communities depleted funds available under the 1957 sanitary projects act. *"Adequate refuse handling is the most important single factor in the control of both rats and flies in the State. Inasmuch as plague is carried by rodents, and because fly-borne diarrhea still claims too many infant lives, the importance of insect and rodent control measures in New Mexico cannot be overemphasized."*

1959: Six fixed dental clinics were established throughout the State primarily for indigent children. Four cardiac clinics were conducted regularly, and a low-cost penicillin program for rheumatic heart patients was established. A diabetes screening program was initiated since it was estimated that there were 20,000 diabetics in the State, 50% of whom were unaware of this condition. A Tumor Board and Tumor Registry were established at the Bernalillo County Indian Hospital. Poison Control Centers had been established in eight cities.

A staphylococcal food poisoning outbreak in Carlsbad was traced to contaminated chocolate cake baked in a commercial bakery. A case of leprosy was discovered in a visiting student. The 27 known typhoid carriers in the State were kept under surveillance. Death from plague of an 11 year old girl near Albuquerque was followed by an extensive survey of the wild rodent population. Heavy contamination of packaged powdered eggs with salmonella organisms was discovered at a summer camp. An investigation at a head louse infestation in Deming revealed two dolls purchased locally for Christmas presents, which were made with human hair, were found to be heavily infested with head lice. An outbreak of dermatitis in Game and Fish Department employees was traced to exposure to bird schistosome cercariae living in the shore waters of a New Mexico lake. Like the U.S., 64% of paralytic polio in New Mexico were in children under five years of age. *"This age group presently constitutes the group at greatest risk."*

In 1959, New Mexico Legislature passed a new Rabies Control Act requiring vaccination of all dogs in the State. Some 50,000 dogs were vaccinated during the first year. Fifteen cases of rabies were reported in 1959. Thirteen were dogs in the Las Cruces area. High levels of rabies infection existed in the El Paso area, with periodic re-introduction to Dona Ana County.

The 1959 Legislature also amended the State Immunization Laws giving the Board of Public Health the authority to decide what immunizations should be required for school children. By December 1959, about 85% of the school children had been immunized in compliance with the law. The law also required the Department of Public Health to supply immunizations for those children whose parents were unable to afford them. In 1959 Immunization Law also required health examinations of all school personnel.

"26 out of 62 communicable diseases can be transmitted by improper food handling and poor restaurant sanitation. These two factors combined make the problem of maintaining restaurant sanitation standards and controls a vital one." While great importance was placed on enforcement of the "pure food" aspect of the New Mexico Food Act, size of staff (1 employee) greatly limited efforts. The reduction of water-borne diseases during the past three decades emphasized the need for an effectiveness of the water supply program. Typhoid fever alone had been reduced by 97%. Investigation was made

during the year of the proposed Cochiti and Galisteo Dam Sites, and recommendations were made for built-in mosquito prevention. The Animas River pollution problem (radium content) was cleared up. Industrial waste was becoming a greater problem. Of special concern was pollution of ground water basins.

The uranium mining and milling industry took the lion's share of occupational health activities. Only one of the six mills operating in the State was found, on intitial study, to comply with the atomic energy requirements relative to air-borne uranium. The use of "crystal counters" to measure storage of uranium in mill workers was introduced into the State. The industry was growing at a tremendous rate, and no expansion of occupational health personnel of lab services had occurred in the Department since 1947. The Department's police role was seen as a secondary one. Of primary concern was assistance to industry and to workers. More than routine inspection was needed; studies and research would be required.

The 1959 Legislature enacted law making the use of shoe-fitting X-ray machines or fluoroscopes unlawful. Another law placed the responsibility for radiological health with the Department of Health. *"The problem of the uranium mining and milling industry will be with the State for a long time. Whether or not legislation had been enacted, the Department's involvement would have continued to increase. Increased awareness by the public would itself force the Department to increase its activity in radiological health."*

1960: The organization of the Department of Public Health had taken on the following structure: A Division of Environmental Sanitation Services, composed of Insect and Rodent Control, Occupational Health, Food and Milk Sanitation, Radiological Health, Water Supply and Swimming Pool Sanitation, and Water Pollution Control; a Division of Hospital Facilities composed of Hill-Burton, and Licensure; a Division of Dental Health; a Division of Health Education which also included aSchool Health Program; a Division of Maternal and Child Health which included Maternity Clinics and Well Child Conferences, a Premature Birth Program, a Midwife Program, Nutrition, Public Health, and Mental Retardation Project; a Division of Mental Health; a Division of Preventive Medicine composed of communical disease control, Accident Prevention, Tuberculosis Control, Cancer Control, Diabetes Control, Heart Disease Control and Venereal Disease Control; a Division of Public Health Laboratories; a Division of Public Health Nursing, a Division of Vital Statistics; and a Division of Business Management.

On August 22, 1960, about one-quarter million gallons of acid uranium mill waste containing radiological and chemical materials was accidently discharged into the San Juan River. This was the first known instance of a major accidental radiological waste spill in this area of the country.

Heavy rains created an exceptionally heavy mosquito population in the Clovis area requiring attention of the Department. Two cases of plague were reported in the State. Regulations governing the practice of mid-wifery were revised. The Mental Health Division prepared the "New Mexico Mental Health Needs and Resources" for the 1960 White House Conference on Children and Youth.

1961: Regulations governing the health aspects of ionizing radiation were adopted, requiring the registration of radiation-producing equipment and radioactive materials. The industrial waste program personnel were involved in controlling and analyzing situations arising from underground injection wells used for waste disposal.

Three cases of plague were reported in the Santa Fe area. Trapping in the Pecos Canyon revealed a plague epizootic in the Windsor Ranch area. Several domestic rat problems were addressed in the Albuquerque area. The Food and Milk Sanitation Section was also given responsibility for Civil Defense Program training. 25 rabies cases were reported, 17 in Las Cruces.

Mental Health staff reached eight full-time and one part-time employees. For the first time, all primary mental health professions were represented on the staff. The number of tuberculin testing surveys of the school population was greatly increased. The Rheumatic Fever Control Register was transferred from the New Mexico Heart Association to the Department of Public Health during the year. The State Public Health Laboratory did evaluation and approval of 69 laboratories to perform serologic testing. An extensive nutrition education effort was conducted in coordination with the Pilot Food Stamp Plan begun during the year.

1962: In September of 1962, the second Mobile Dental Unit was put into operation. During the year, the State Public Health Laboratory obtained an instrument for estimation of radioactivity in water. Implemented also was a program of health mobilization and a civil defense-medical self-help training program with establishment of emergency hospital capabilities.

An outbreak of western encephalitis (sleeping sickness) occurred in horses located in Bernalillo County. Quick information and setting of a mosquito Control Program averted human cases or additional horse cases. For the first time, one of the more serious fungus infections, histoplasmosis, was identified as originating in one area of the State. An outbreak of anthrax occurred in the Taos Pueblo during the year.

The development of an effective oral polio vaccine had far reaching effects on the State. Close to half a million New Mexicans took Types I and II oral polio vaccine in 1962.

1963: The Mobile Dental Units extended care to the chronically ill and aging in 22 communities during 1963. 107 incubators were made available for home use in the instance of premature infants. 92 midwives were licensed during the year, and these 92 at-

tended 1.3% of births in the State during the year. San Miguel (31% midwife deliveries) Mora (24%), and Taos (9%) had the highest percentages of midwife deliveries.

A Vaccination Assistance Project Award was made to New Mexico in July of 1963. This award was to provide for preliminary immunizations and boosters against polio, diphtheria, whooping cough, tetanus, and smallpox for children under 5. Venereal Disease Control experienced an 88% epidemiological success rate in 1963, that is, the source of infection was found in this percent of the reported cases.

The Department gave considerable attention during the year to the misuse of agricultural pesticides. Mosquito control was again a major problem. Of plants surveyed in 1963, 38% did not conform to New Mexico Department of Public Health Regulations governing the sanitation of places of employment for one or more of the following reasons: inadequate toilet facilities, lack of hot running water, inadequate supply of soap or paper towels, employing 10 or more women without providing a ladies' retiring room.

Developments affecting the State's health picture included the development and licensing of two measles vaccines; the Surgeon General's Report on "Smoking and Health"; the resolution passed regarding the use of seat belts.

1966: In accordance with a grant under Public Law 88-206, the Department was involved in the process of establishing an effective program of air pollution control. The development stage had been scheduled to run from January 1965 through June 1967, and involved inventory of significant sources of air pollution in order to establish emission standards. The enforcement of standards and procedures were scheduled to begin in July 1967.

In preparation for participation in the Medicare Program, all X-ray facilities were surveyed by the Radiological Health Section to comply with basic requirements. A re-survey of Dental X-ray units was accomplished using "surpax" units. Implementation was made for use of a new radon badge. Radium spills of two hospitals using radium for therapy were investigated. A total of 151 users of ionizing radiation were registered. New Mexico possessed 6 uranium tailing piles posing great public concern. During 1966, the Department also participated in the National Air Surveillance Network which involved air sampling for beta activity.

The Department threatened legal action against the town of Taos for improper operation of its sewage treatment plant. The water supply and water storage system disclosed glaring deficiencies, as well. This controversy resulted in a personal visit by the governor, and received nationwide coverage by the news media.

As a result of the first Governor's Conference on Environmental Health Planning, the Department established a full-time program on housing code enforcement.

Heavy flooding in Eddy, Lea, and Chaves Counties required tremendous mosquito control efforts on the part of the Department. Nine New Mexico counties experienced plague epidemics among animals. Three cases of human rabies were reported during the year. Slaughterhouse regulations were revised.

The Public Health Nursing Advisory Council was established in June, 1966. A Statewide PKU Program was enacted by the Legislature. During the year, 78% screening for PKU was attained. An epidemic of scarlet fever occurred in Pecos and Raton.

The Department pushed for venereal disease education as an integral part of junior and senior high school curricula. The emphasis on teenage education was necessitated by the ever increasing ratio of teenage venereal disease patients. The year's reported VD caseload saw one in five early syphilis patients to be under 20 years of age. One in four gonorrhea patients was in the teenage category.

Benefits under the Health Insurance Program (Public Law 89-97, Medicaid) became effective July 1, 1966, requiring medical care administration capabilities in the Department for certification of facilities. The year celebrated the 20th aniversary of the Hill-Burton Act; 86 projects in New Mexico had been approved under the act. Construction of facilities for the mentally retarded and Community Mental Health Centers was a relatively new program begun in 1965 under Public Law 88-164.

Tumor registries had now been established at Bataan Memorial Methodist Hospital and Regional Medical Program. A promotional campaign was initiated for cancer self-examination of the breast for women. Heart disease education, including education regarding rheumatic fever and hazards of smoking and obesity, was given particular interest, great emphasis was placed on efforts for discouraging school children from smoking. New federally supported projects providing comprehensive health services to migrant workers and their families were initiated.

The public health approach to accident prevention was sharply increased during the year. A Program of accident prevention was established. A defensive driving course was introduced. A survey of ambulance services availability was conducted.

Mass disaster policies were developed. A Division of Emergency Health Services was established. The function of this Division was to: write and update a State Disaster Plan, pertaining to both natural and man-made disasters; establish lines of communcation in the event of such disaster; administer the Medical Self-Help Training Program, a program instructing individuals in basic health care, should such services not be available because of a disaster; and administering the packaged disaster hospital plan, which involved location and storage of all needed supplies in selected areas for establishment of hospital facilities in case of disaster.

The Public Health Laboratory had occupied the same facilities for 30 years in 1966. Much of the equipment was in poor condition and workspace was inadequate for the increasing workload. The laboratory's *"...animal quarters would not meet requirements of the Federal Laboratory Animals Welfare Act."* The need was voiced for a new laboratory facility.

Environmental conditions in many schools, particularly rural schools were still poor and in need of attention.

July 1967: On October 1, 1967, executive order merged the Department of Public Health and the Department of Public Welfare into the Health and Social Services Department.

July 1967 was set as the effective date for the adoption of the U.S. Public Health Services Grade "A" Pasteurized Milk Ordinance and revised New Mexico regulations governing the grading and grade labeling of milk and milk products.

The Water Quality Act had been enacted in 1965 to establish waste quality standards, inspection and enforcement. The 1967 Legislature established the New Mexico Water Quality Control Commission.

The Air Quality Control Act was enacted during the year. Evidence of smog had already been detected in the middle Rio Grande Valley leading to the establishment of an air shed.

1968-69 The Department's Health Activities Organizational Structure consisted of: a Medical Services Division consisting of Children's Bureau, Medical Services, Dental Health and Nursing; a Health Facilities Services Division consisting of Construction Services, Institutional Licensing, and certification 18 sections; a Community Development Division consisting of Community Planning, Mental Health, School Health, and Mental Retardation; an Environmental Services Division consisting of Special Projects, Consumer Protection, Occupation, Radiological, and Air Quality Control, Water and Liquid Waste Control and General Sanitation; a Health Laboratories Division consisting of administration, microbiology, virus, Chemistry, and two branch laboratories; a Division of Local Health; a Division of Emergency Services. The Vital Records Section, as well as all support functions were located in the overall Department's Administrative and Support Sections.

October 1968, the Bernalillo County Health Office opened the South Valley Satellite Clinic. The Albuquerque Maternity and Infant Care Project assumed financial and administrative responsibility for 5 maternity clinics in the area. The Southwest Mental Health Center began operation. The State School Immunization Regulations were updated during this period, and an Infant Surveillance Program for immunization was begun. The New Mexico Health Manual for elementary and secondary schools was revised. In 1969, a commision on aging was established.

In June of 1969, protests over a proposed pulp paper mill in the State signaled the start of a series of fact-finding hearings on air pollution. In 1968, the Legislature passed the State Radiation Protection Act. Activity was high in the Area of Water Supply System Construction under the New Mexico Sanitary Projects Act, and through federal funds. The Period saw a heavy demand for the installation of flouridation equipment, and review of plans and "specks" for swimming pools. The use of federal funds also resulted in the construction of many sewage systems throughout the State. In 1968, New Mexico became the first State to have treatment facilities linked to all existing sewer systems. Establishment of a "storet" system for development, storage and retrieval of water quality data started January 1, 1969. An industrial waste survey was also conducted during this period. Ambient air quality standards and air quality regulations were drafted, and an inventory of atmospheric emissions made.

In the area of Emergency Services, 14 packaged disaster hospital units were maintained as well as a mobile van with equipment for a 50 bed hospital. The Medical Self-Help Program was promoted throughout the State.

An upsurge in venereal disease was noted, not only in New Mexico but nationally as well. Implacated as probable factors by sociologists and physicians were: the changing standards of conduct resulting in more teenage sexual activity; an increasing mobile population; the "hippie" movement; increased diagnosis. An intensified effort of venereal diases education was intitiated during this period.

Dental Health Education and Anti-Smoking Campaigns also received added attention by the Department during the year. An intensive Spraying Program was initiated because of a high incidence of western encephalitus virus activity. Plague surveillance took place in 18 counties; 2 human cases were reported. Dona Ana County remained in quarantine through the year. Carlsbad also was placed in quarantine as rabies remained a problem, particularly in the southern part of the State. Laboratory analyses led to the discovery of horsemeat in 55 samples of meat sold to schools or stores as hamburger, a purely beef product. A heavy schedule of inspection and licensure of health and child care facilities was experienced during the period. A Migrant Health Project for providing dental health services was initiated. 14,715 kindergarten and first grade children were given tuberculosis screening tests, with 57 reactors. The Child Study Center was established in Albuquerque.

1969-70: The fiscal year proved to be a very tight year for the department. Budget "belt tightening" was experienced on all fronts except environmental, notably air pollution control. Budget restraints resulted in the limiting of travel, salary freezes, closing of the central files, termination of over-the-counter issuance of birth and death certificates; publications were discontinued, construction of water systems for small communities were discontinued.

The period noted an awakening of citizens to environmental problems—particularly pollution. An air quality control engineer was added to the staff. The Legal Division added an attorney to handle environmental matters. A chemical pollution research program was implemented August 1, 1970. An ecological advisory council was established. Project

Dakota was initiated. The project involved restoration of an abandoned uranium mine into a radiation research field.

In a massive effort, in conjunction with the Center for Disease Control, 90,000 children in the State were immunized against rubella in a nationwide attempt to destroy the reservoir of the disease before the expected 1970-71 epidemic.

Six cases of plague were reported—the only ones in the country. New Mexico ranked highest in the Nation in the Incidence of infectious syphilis. Intense work was required to handle an incident of inorganic mercury poisoning. Fish were planted in several mosquito-breeding areas.

New Mexico ranked lowest of the twelve western States in salaries paid Public Health Nurses.

1970-71: The Federal Environment Protection Agency was created. The New Mexico Legislature created the Environmental Improvement Board and designated the Environmental Improvement Agency. The official title of the Sanitarians was changed to Environmentalists.

The Emergency Services Division was abolished. The Medical Self-Help Program was transferred to the Office of Civil Defense, and all other services were transferred to the Health Facilities Division. Through legislative action, all functions of Mental Health and Mental Retardation were transferred to the Department of Hospitals and Institutions. The Maternity and Infant Care Project was transferred to the University of New Mexico.

The Vaccination Assistance Project continued its year-old crash program to immunize children under 12 years of age against rubella; 176,161 children were immunized during the fiscal year. The program was part of a nationwide effort to prevent the spread of the disease to pregnant women by eradicating the reservoir of infection in younger children. Unborn babies whose mothers contact rubella are liable to birth defects. Federal health officials had predicted an epidemic of rubella in the winter of 1970-71 or 1971-72, with the consequent birth of thousands of deformed children, an aftermath of the last such epidemic.

Venereal disease reached epidemic proportions in New Mexico and throughout the country. Cases of gonorrhea among those 21 years of age and younger accounted for 30% of the total cases in 1970. New State Legislation permitting treatment of venereal disease in minors without the consent of a parent providing a tool for combating...*"what is considered the most serious communicable disease, gonorrhea, in the Sate."* Estimates indicate one in 35 persons to be infected with gonorrhea throughout the State. New legislation also was enacted requiring all laboratories to report positive results of venereal disease tests to the Department.

The Department was designated as the agency to implement the Federal Occupational Health and Safety Act.

The discovery of mercury in fish taken from several bodies of water in New Mexico continued to spotlight the hazards of mercury in the environment. A vigorious sampling program was pursued.

A Noise Survey was conducted in various lumber mills throughout the State. Noise levels inside all mills were found to be above recommended levels.

A concentrated program of Pure Food Control under the New Mexico Food Act for which there had been no funding in the past was initiated.

Under the Federal Clean Air Act air quality regions were organized.

A used air stream travel trailer was converted into a mobile laboratory for surveys of sewage treatment plants and streams to determine the effects of waste water discharges on New Mexico waters.

Hearings on the Four Corners Power Plant in Farmington were conducted concerning wastes discharged from the plant, possible mercury contamination of the water supply in the Four Corners area, and violation of Water Quality Control Commissions Regulations.

The goal of Mission 5000, launched nationwide in July 1970, was to eliminate 5,000 dumps by July 1972. Only eight cities in New Mexico were operating sanitary landfills when the Mission was begun, but by the end of the 1970-71 fiscal year, an additional 20 landfill sites had been developed for a total of 28 municipalities representing more than half the State's population. Conversion of dumps to 31 more landfills remained to be accomplished.

The Department began taking a more vigorous approach to enforcement of regulations and legal action against violators in the area of Environment Protection.

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As stated at the onset, it is not the purpose of this presentation to provide a detailed history of the Department. It is hoped that the presentation has provided some insight into the early beginnings of public health in New Mexico, and also provide a quick "mini-tour" through time, catching glimpses of a changing and growing department.

The past ten years have been ones of exceptionally glaring changes in whole national atmosphere, and the State's public health effort cannot but be impressed by, and reflect these changes.

The "Executive Reorganization Act" on April 1, 1978, created the present governmental structure for public health in New Mexcio under the New Mexico Health and Environment Department. The complex and varied nature to which public health has grown is reflected in the organizational chart of the department. While this presentation is not the selected place for a detailed description of that recent growth and change, the organizational chart provides a generalized view of that complexity.

Over the years, the Department has grown tremendously. As of 1981, the Health and Environment Department employed approximately 3500 persons. Its responsibilities have reached into areas never

even dreamed of by its early founders, as well as maintaining basic activities laid out from its conception. The public health effort is not apprehensive of the future for the future is a challenge and the public health effort is an "old hand" at meeting challenges. The job is complex—the purpose is simple—HEALTH PROMOTION, DISEASE PREVENTION.

"Health promotion—disease prevention", a catchy phrase which has become popular with the fashionable and "in" status which health has achieved in recent years. But the concept is not new. Many an old-time public health proponent and the early public health pioneers who have gone to that "great health department in the sky" would merely shake their heads and reflect: *"Health promotion—disease prevention; that's what we've been telling them all this time."*

NEW MEXICO HEALTH AND ENVIRONMENT DEPARTMENT

OFFICE OF THE SECRETARY
George S. Goldstein, Ph.D., Secretary
Larry J. Gordon, MS, MPH, Deputy Secretary

- OFFICE OF GENERAL COUNSEL — James G. Huber, J.D.
- OFFICE OF INTERNAL AUDIT — George Ortega
- OFFICE OF CIVIL RIGHTS — Alida Merlino
- ADMINISTRATIVE ASSISTANT — Mickey Stewart
- PUBLIC INFORMATION OFFICE — Maynard Chapman

ADMINISTRATIVE SERVICES DIVISION — Roy Soto, Director; Simon Padilla, Assistant Dir.
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- DATA PROCESSING BUREAU — Louis Baca, Sr., Chief
- EMPLOYEE AFFAIRS BUREAU — Michael Rivera, Chief
- PROCUREMENT/ASSETS CONTROL BUREAU — Gary Harries, Chief
- BUDGETS BUREAU — Toby Rosenblatt, Chief
- CONTROLS/REPORTS BUREAU — Anthony Eboli, Chief

SHCC

HEALTH PLANNING and DEVELOPMENT DIVISION — Danielle Wilson, MA, Director
- STATE HEALTH PLANNING and DEVELOPMENT BUREAU — Ruby D. Monroe, Chief
- PROGRAM COORDINATION BUREAU — Joseph G. Harris, MPH, Chief
- PROGRAM SUPPORT BUREAU — James Huttenloch, MS, Chief

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- BIOLOGICAL SCIENCES BUREAU — Michael Skeels, Ph.D., Chief
- CHEMISTRY BUREAU — Curtis Coleman, Ph.D., Chief

RESIDENTIAL TREATMENT DIVISION — Robert A. Garcia, MA, Director; John Gabaldon, Deputy Dir.

BH CC

BEHAVIORAL HEALTH SERVICES DIVISION — Robert A. Garcia, MA, Acting Dir.; Ronald Vigil, Deputy Director
- PROGRAM SUPPORT BUREAU — Clarice B. Gelz, Acting Chief
- PLANNING, EVALUATION, and RESEARCH BUREAU — Edward Deaux, Ph.D., Chief
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- FORENSIC SYSTEMS BUREAU — William Mattews, Ed.D., Acting Chief
- MENTAL HEALTH BUREAU — Arturo Rangel, Chief
- SUBSTANCE ABUSE BUREAU — Ronald Vigil, Acting Chief

HEALTH SERVICES DIVISION — Michael J. Burkhart, MPH, Dir.

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- VITAL STATISTICS BUREAU — Michael Ammann, MPA, Chief
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Assistant Director - Health Promotion & Disease Prevention — Jonathan M. Mann, MD, MPH
- CHRONIC DISEASE CONTROL BUREAU — W. Rosenblatt, MD, Chief
- FAMILY HEALTH SERVICES BUREAU — J. Grimaldi, MD, MPH, Chief
- FIELD OPERATIONS BUREAU — Mary Lou Martinez, MA, Chief
- HEALTH PROMOTION BUREAU — Tina Fields, MPH, Ph.D., Chief
- PREVENTIVE HEALTH SERVICES BUREAU — J. Calderone, DDS, DPH, Chief

ENVIRONMENTAL IMPROVEMENT DIVISION — Thomas E. Baca, MPH, Director
- PROGRAM SUPPORT BUREAU — Dale I. Patrick, MSPH, Chief
- OFFICE OF LEGAL SERVICES — Bruce S. Garber, JD

Assistant Director for Statewide Services — DuDra L. Clayton, MPH
- AIR QUALITY BUREAU — Lee Lockie, MS, Acting Chief
- OCCUPATIONAL HEALTH & SAFETY BUREAU — Michael Curtis, MSEH, Chief
- RADIATION PROTECTION BUREAU — Alphonso Topp, MS, Act. Chief
- WATER POLLUTION CONTROL BUREAU — Joseph Pierce, MSEH, Chief

Assistant Director for Community Services — Russell F. Rhoades, MPH
- COMMUNITY SUPPORT SERVICES BUREAU — Jon Thompson, MPH, Chief
- DISTRICT I — William C. Bennett, MS, Manager
- DISTRICT II — Ned Weber, MS, Manager
- DISTRICT III — Roy McKeag, MPH, Manager
- DISTRICT IV — John Gunn, MPH, Manager

Environmental Evaluation Group — Robert H. Neill, MS

Boards, Councils, Commissions and Committees:

BHCC – Behavioral Health Coordinating Council
SHCC – Statewide Health Coordinating Council
EIB – Environmental Improvement Board
OHSRC – Occupational Health and Safety Review Commission
RTAC – Radiation Technical Advisory Committee
WQCC – Water Quality Control Commission

RESIDENTIAL TREATMENT DIVISION
- FORENSIC HOSPITAL — Macario Gonzalez, Administr.
- FORT BAYARD MEDICAL CENTER — Art Salas, Administrator
- NEW MEXICO STATE HOSPITAL — John Gabaldon, Acting Adm.
  - New Mexico State Hospital
  - Meadows Nursing Home — Ray Crespin, Adm.
- LOS LUNAS HOSPITAL and TRAINING SCHOOL — Joseph Mafeju, Administrator
- FORT STANTON HOSPITAL and TRAINING SCHOOL — Moises Campos, Administrator
  - Fort Stanton Hospital and Training School — Mark Delgado, Adm.
  - Villa Solano Program — Ervin Aldaz, Adm.

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TABLE A-1
NEW MEXICO
CITY POPULATION ETSIMATES
1978

CITY	COUNTY	1970 POPULATION	1978 POPULATION	% CHANGE 1970-1978
Alamogordo	Otero	23,035	24,496	6.3
Albuquerque	Bernalillo	243,751	295,150	21.1
Artesia	Eddy	10,315	10,971	6.4
Aztec	San Juan	3,354	5,201	55.1
Bayard	Grant	2,908	2,997	3.1
Belen	Valencia	4,823	6,317	31.0
Bernalillo	Sandoval	2,016	2,397	18.9
Bloomfield	San Juan	1,574	2,541	61.4
Bosque Farms	Valencia	1,699	2,806	65.2
Capitan	Lincoln	439	792	80.4
Carlsbad	Eddy	21,297	24,978	17.3
Carrizozo	Lincoln	1,123	1,166	3.8
Causey	Roosevelt	150	150	--
Central	Grant	1,864	1,845	- 1.0
Chama	Rio Arriba	899	976	8.6
Cimarron	Colfax	927	872	- 5.9
Clayton	Union	2,931	3,015	2.9
Cloudcroft	Otero	525	613	16.8
Clovis	Curry	28,495	30,474	6.9
Columbus	Luna	241	284	17.8
Corrales	Bernalillo/ Sandoval	1,614	2,455	52.1
Corona	Lincoln	262	213	-18.7
Cuba	Sandoval	415	560	34.9
Deming	Luna	8,343	10,433	25.1
Des Moines	Union	204	187	- 8.3
Dexter	Chaves	746	945	26.7
Dora	Roosevelt	196	191	- 2.6
Eagle Nest	Colfax	94	100	6.4
Elida	Roosevelt	233	227	- 2.6
Encino	Torrance	250	283	13.2
Espanola	Santa Fe/ Rio Arriba	5,934	7,769	30.9
Estancia	Torrance	721	847	17.5
Eunice	Lea	2,641	2,572	- 2.6
Farmington	San Juan	21,979	31,792	44.6
Floyd	Roosevelt	248	230	- 7.3
Folsom	Union	75	74	- 1.3
Ft. Sumner	De Baca	1,615	1,703	5.4
Gallup	McKinley	14,596	18,293	25.3
Grenville	Union	21	12	-42.9
Grady	Curry	104	92	-11.5
Grants	Valencia	8,768	11,854	35.2
Hagerman	Chaves	953	1,057	10.9
Hatch	Dona Ana	867	1,011	16.6
Hobbs	Lea	26,025	29,378	12.9
Hope	Eddy	90	162	80.0
House	Quay	119	158	32.8
Hurley	Grant	1,796	1,569	-12.6
Jal	Lea	2,602	2,630	1.1
Jemez Springs	Sandoval	356	487	36.8
Lake Arthur	Chaves	306	323	5.6

CITY	COUNTY	1970 POPULATION	1978 POPULATION	% CHANGE 1970-1978
La Mesilla	Dona Ana	1,713	1,897	10.7
Las Cruces	Dona Ana	37,857	43,255	14.3
Las Vegas (City & Town)	San Miguel	14,320	14,727	2.8
Logan	Quay	386	480	24.4
Lordsburg	Hidalgo	3,429	3,669	7.0
Los Lunas	Valencia	973	1,373	41.1
Los Ranchos de Albuquerque	Bernalillo	1,900	2,041	7.4
Loving	Eddy	1,192	1,465	22.9
Lovington	Lea	8,915	9,392	5.4
Magdalena	Socorro	652	659	1.1
Maxwell	Colfax	393	362	- 7.9
Melrose	Curry	636	769	20.9
Milan	Valencia	2,222	2,855	28.5
Moriarty	Torrance	758	1,230	62.3
Mosquero	Harding	244	206	-15.6
Mountainair	Torrance	1,022	1,089	6.6
Pecos	San Miguel	598	705	17.9
Portales	Roosevelt	10,554	10,408	- 1.4
Questa	Taos	1,095	1,318	20.4
Raton	Colfax	6,962	7,658	10.0
Red River	Taos	185	331	78.9
Reserve	Catron	354	404	14.1
Roswell	Chaves	33,908	39,511	16.5
Roy	Harding	476	422	-11.3
Ruidoso	Lincoln	2,216	4,127	86.2
Ruidoso Downs	Lincoln	702	993	41.5
San Jon	Quay	308	286	- 7.1
Santa Fe	Santa Fe	41,167	46,162	12.1
Santa Rosa	Guadalupe	2,485	2,384	- 4.1
San Ysidro	Sandoval	182	206	13.2
Silver City	Grant	8,557	9,858	15.2
Socorro	Socorro	5,849	6,481	10.8
Springer	Colfax	1,574	1,374	-12.7
Taos	Taos	2,475	2,915	17.8
Tatum	Lea	982	1,003	2.1
Texico	Curry	772	827	7.1
Tijeras	Bernalillo	160	193	20.6
Truth or Consequences	Sierra	4,656	5,467	17.4
Tucumcari	Quay	7,189	7,229	0.6
Tularosa	Otero	2,851	3,037	6.5
Vaughn	Guadalupe	867	767	-11.5
Virden	Hidalgo	151	202	33.8
Wagon Mound	Mora	630	639	1.4
Willard	Torrance	209	309	47.8
Williamsburg	Sierra	367	723	97.0

SOURCE: *Bureau of the Census, Bureau of Business and Economic Research, University of New Mexico.*

TABLE A-2
NEW MEXICO
RESIDENT LIVE BIRTHS
PERCENTAGE BY AGE OF MOTHER
1970, 1978, 1979

COUNTY	TOTAL	PERCENTAGE DISTRIBUTION BY AGE OF MOTHER						
		< 15	15-17	18-19	20-24	25-29	30-34	35 +
DISTRICT I								
MCKINLEY:								
1970	1,390	.1	9.3	12.5	35.6	21.9	15.9	10.3
1978	1,607	.9	9.3	11.8	39.5	26.6	11.8	5.7
1979	1,625	.2	7.1	10.5	39.5	28.7	13.3	5.7
SAN JUAN:								
1970	1,393	.1	9.9	10.9	36.2	26.2	12.9	8.7
1978	1,895	.3	7.2	12.0	36.0	28.7	11.9	3.9
1979	2,089	.0	6.2	12.9	37.3	26.9	11.8	5.3
DISTRICT II								
COLFAX:								
1970	213	—	5.2	15.5	35.7	25.8	11.3	6.6
1978	206	—	8.3	15.5	35.9	27.7	8.3	9.9
1979	221	.5	6.8	14.5	32.1	30.8	11.3	9.1
LOS ALAMOS:								
1970	217	—	2.8	9.6	28.6	37.3	18.0	8.8
1978	209	—	1.9	5.3	18.7	38.8	24.9	11.0
1979	193	—	3.6	9.1	20.7	33.7	26.9	11.9
MORA:								
1970	81	—	7.9	19.8	99.9	12.3	12.3	8.6
1978	69	—	19.1	20.3	21.9	20.3	19.1	9.9
1979	78	1.3	5.1	19.2	21.8	39.7	11.5	1.3
RIO ARRIBA:								
1970	661	.2	9.2	11.3	36.8	23.0	13.9	10.6
1978	669	.3	8.3	11.9	39.9	22.7	19.8	7.5
1979	635	.2	6.3	15.1	33.5	27.1	11.5	6.3
SAN MIGUEL:								
1970	966	.2	6.9	13.1	92.1	20.6	9.9	7.7
1978	956	.2	7.9	12.3	38.2	29.3	11.6	5.0
1979	960	.2	8.3	11.7	32.8	29.3	16.1	6.5
SANTA FE:								
1970	1,102	.1	9.6	12.0	36.0	29.5	13.3	9.2
1978	1,209	.2	6.6	11.2	29.0	30.7	16.0	6.9
1979	1,233	—	5.6	9.7	32.9	28.5	17.8	6.7
TAOS:								
1970	909	—	5.9	10.9	37.1	22.3	10.9	12.9
1978	362	.3	5.0	9.1	30.7	30.9	18.2	6.9
1979	398	.3	7.3	11.3	32.9	26.9	16.6	5.8
DISTRICT III								
BERNALILLO:								
1970	6,998	.2	5.5	12.2	38.2	27.0	10.8	6.2
1978	6,750	.1	5.8	10.1	39.9	30.3	19.7	9.1
1979	7,179	.2	5.7	10.0	39.0	31.7	19.0	9.3
SANDOVAL:								
1970	998	.9	7.6	10.0	32.6	29.3	13.6	11.9
1978	555	.9	5.6	10.5	33.3	27.0	16.2	7.0
1979	599	.6	9.6	10.1	33.5	27.8	16.5	7.0
TORRANCE:								
1970	87	—	12.6	10.3	36.8	19.9	11.5	13.8
1978	105	—	7.6	10.5	91.0	25.7	9.5	5.7
1979	109	—	8.3	9.2	37.6	29.8	15.6	9.6
VALENCIA:								
1970	920	.1	5.0	13.0	38.2	23.5	11.2	9.0
1978	1,325	.2	7.5	12.9	36.1	28.9	10.6	9.2
1979	1,339	.2	6.6	13.2	36.6	27.3	11.5	9.6
DISTRICT IV								
CURRY:								
1970	1,018	.1	9.6	19.7	96.9	19.9	9.9	9.8
1978	995	.1	5.3	19.0	99.5	29.5	7.7	3.8
1979	970	.9	6.9	12.5	95.8	23.7	7.0	3.7
DE BACA:								
1970	33	—	12.1	9.1	30.3	21.2	18.2	9.1
1978	33	—	9.1	18.2	92.9	29.2	3.0	3.0
1979	92	2.9	7.1	16.7	21.9	38.1	11.9	2.9
GUADALUPE:								
1970	96	—	9.9	13.5	39.9	19.6	13.5	19.6
1978	90	—	19.9	13.3	37.8	20.0	6.7	7.8
1979	72	1.9	13.9	13.9	91.7	19.9	8.3	1.9

COUNTY	TOTAL	PERCENTAGE DISTRIBUTION BY AGE OF MOTHER						
		< 15	15-17	18-19	20-24	25-29	30-34	35 +
DISTRICT IV (Cont'd)								
HARDING:								
1970	16	—	—	12.5	93.8	25.0	6.3	12.5
1978	16	—	12.5	18.8	18.8	37.5	6.3	6.3
1979	15	—	20.0	13.3	20.0	26.7	13.3	6.7
QUAY:								
1970	189	.5	9.0	15.9	39.2	19.6	10.6	5.3
1978	178	—	12.9	19.1	32.0	23.0	8.9	5.1
1979	180	1.1	10.0	19.9	37.2	22.2	12.2	2.8
ROOSEVELT:								
1970	290	.7	5.2	18.6	98.6	18.6	3.9	9.8
1978	276	.7	7.2	13.0	91.7	27.5	5.9	9.3
1979	273	.9	6.6	8.8	92.5	28.9	10.6	2.2
UNION:								
1970	89	—	3.6	9.5	99.0	26.2	10.7	6.0
1978	79	—	10.8	12.2	35.1	29.7	8.1	9.1
1979	76	—	2.6	10.5	93.9	30.3	13.2	—
DISTRICT V								
CATRON:								
1970	33	—	6.1	12.1	36.9	30.3	9.1	6.1
1978	39	—	10.3	7.7	20.5	96.2	10.3	5.1
1979	95	—	2.2	9.9	31.1	90.0	13.3	8.9
GRANT:								
1970	512	.2	9.9	12.1	91.2	29.0	11.1	6.9
1978	512	—	7.2	12.9	36.3	25.2	13.1	5.3
1979	596	.9	7.0	15.8	31.5	26.6	12.5	6.9
HIDALGO:								
1970	111	—	6.3	8.1	90.5	27.0	6.3	11.7
1978	198	—	10.1	12.2	39.5	27.0	19.2	2.0
1979	130	—	7.7	13.1	92.3	29.6	11.5	.8
LUNA:								
1970	238	—	8.0	10.9	35.7	21.8	15.5	8.0
1978	230	.9	7.9	19.6	27.8	23.0	12.2	9.1
1979	297	.3	5.1	10.9	93.9	22.6	13.8	9.9
DISTRICT VI								
CHAVES:								
1970	809	.1	8.6	15.3	36.9	22.6	10.9	5.5
1978	897	.2	9.6	19.8	39.5	29.0	11.5	5.5
1979	922	.2	10.9	13.6	35.9	29.1	12.0	9.3
EDDY:								
1970	775	.1	9.9	16.3	39.5	18.8	9.0	6.8
1978	891	.1	9.9	12.8	90.6	25.9	8.9	2.7
1979	861	.6	8.1	13.6	39.3	25.7	9.9	3.9
LEA:								
1970	980	.3	9.0	15.9	92.9	19.3	8.0	9.7
1978	1,113	.2	7.7	17.3	39.9	22.8	8.6	3.9
1979	1,195	.1	8.9	16.3	37.5	26.1	8.9	3.2
LINCOLN:								
1970	129	—	9.8	15.3	91.1	22.6	11.3	9.8
1978	151	—	6.0	7.9	38.9	31.8	10.6	5.3
1979	167	.6	9.2	10.2	32.3	35.9	10.8	6.0
OTERO:								
1970	977	.2	9.6	11.9	99.1	22.6	11.7	9.7
1978	999	.3	9.9	19.1	39.9	27.5	9.7	3.5
1979	999	.2	5.0	11.2	91.6	29.6	8.8	3.6
DISTRICT VII								
DONA ANA:								
1970	1,666	—	9.1	11.7	37.6	23.9	13.5	9.3
1978	1,589	.5	5.9	10.9	36.2	27.0	19.3	5.2
1979	1,697	.1	5.9	10.5	37.9	28.2	13.7	9.8
SIERRA:								
1970	70	—	10.0	7.1	32.8	30.0	11.9	8.5
1978	72	1.9	12.5	12.5	38.9	19.9	11.1	9.2
1979	99	—	10.1	13.1	36.9	19.1	18.2	8.1
SOCORRO:								
1970	258	.3	9.2	16.2	31.3	23.6	13.5	10.9
1978	252	—	7.5	16.7	33.7	29.2	13.1	9.8
1979	237	—	11.9	13.5	39.6	25.3	11.9	3.8

TABLE A-3
NEW MEXICO RESIDENTS
FERTILITY RATES
BIRTH RATES BY AGE OF MOTHER
BY COUNTY 1976, 1977, 1978, 1979

HEALTH DISTRICTS	COUNTY		FERTILITY RATE (a)	BIRTH RATES BY AGE GROUP								
				10-14	15-19			20-24	25-29	30-34	35-39	40-44
					TOTAL	15-17	18-19					
	NEW MEXICO	1976	88.2	1.1	73.4	45.3	124.4	169.1	154.0	70.7	23.4	3.8
		1977	84.4	.8	70.5	42.6	119.2	165.5	143.7	78.1	24.6	3.1
		1978	90.4	.7	71.6	41.2	124.8	167.4	163.4	80.4	24.7	3.4
		1979	92.8	.8	70.1	57.0	122.3	172.2	171.8	83.7	26.1	3.1
	MCKINLEY:	1976	136.2	3.1	119.8	80.6	199.1	253.6	207.4	97.2	54.4	10.5
1		1977	137.7	2.4	113.5	66.0	209.4	261.4	202.9	105.5	58.7	10.6
		1978	134.6	1.8	113.8	75.3	191.7	247.0	214.1	107.8	41.0	10.7
		1979	134.4	1.0	99.8	57.0	171.2	246.0	232.2	120.3	46.9	7.6
	SAN JUAN:	1976	115.3	1.4	97.7	61.3	182.5	244.3	188.3	90.3	32.2	7.8
		1977	121.1	1.3	92.1	51.5	184.0	266.2	216.1	96.4	31.6	6.8
		1978	124.2	1.0	96.0	51.4	200.2	267.0	235.2	100.0	26.2	3.9
		1979	134.8	0.2	103.4	47.6	235.2	300.2	235.4	107.1	38.4	5.7
	COLFAX:	1976	88.7	—	96.0	48.3	208.4	156.4	154.4	80.1	24.0	6.5
		1977	95.5	1.4	95.0	61.0	175.0	184.2	143.3	117.2	24.6	3.4
		1978	88.4	—	90.2	44.5	198.8	184.6	161.4	57.8	17.6	5.1
		1979	44.4	1.4	86.1	34.1	147.5	183.5	142.1	84.7	20.4	2.5
	LOS ALAMOS:	1976	50.5	—	14.7	3.1	75.0	114.3	122.6	74.4	12.2	2.4
		1977	46.2	—	4.1	1.6	44.8	95.2	113.8	80.3	14.5	.7
		1978	55.7	—	18.0	4.7	80.4	107.7	134.7	80.7	24.7	2.1
		1979	51.1	—	14.1	10.8	58.8	104.4	111.3	78.7	30.4	.7
	MORA:	1976	74.5	—	50.0	42.2	67.6	175.2	132.5	116.4	10.3	—
		1977	41.2	—	54.3	30.7	123.3	114.4	246.3	80.0	21.1	10.5
		1978	42.6	—	45.2	56.3	183.1	106.1	162.5	121.6	53.2	5.3
		1979	114.0	3.8	83.0	25.3	211.3	124.8	342.4	123.3	10.8	—
	2 RIO ARRIBA:	1976	103.7	—	80.7	51.3	140.4	144.0	205.2	88.5	31.4	2.0
		1977	104.4	.5	81.5	41.7	163.1	143.6	202.1	42.5	35.6	3.3
		1978	108.4	1.0	81.7	51.0	144.5	207.3	171.6	114.0	52.6	4.5
		1979	103.1	.5	84.0	36.7	180.8	188.5	143.5	84.0	43.6	2.5
	SAN MIGUEL:	1976	73.6	1.5	72.6	62.7	84.5	140.8	186.2	84.4	31.7	5.2
		1977	88.6	—	72.6	56.4	91.3	118.2	173.5	42.2	45.1	4.3
		1978	42.5	.7	64.2	46.0	85.4	151.8	170.2	41.2	33.0	5.1
		1979	42.4	.7	63.8	48.4	82.3	131.1	147.4	126.7	46.3	3.3
	SANTA FE:	1976	84.6	.5	57.8	33.5	105.1	151.0	175.4	83.6	18.8	3.6
		1977	85.4	.5	60.5	35.0	104.4	136.4	173.2	84.1	36.0	3.5
		1978	86.4	.5	66.4	37.4	122.5	137.3	171.8	84.6	32.5	3.4
		1979	87.0	—	57.3	31.4	104.7	151.0	160.5	100.4	33.7	4.6
	TAOS:	1976	86.7	—	56.6	35.6	100.4	144.2	144.7	87.2	14.7	3.0
		1977	42.2	—	57.5	22.8	131.4	171.7	205.0	78.8	23.3	2.0
		1978	88.7	.8	45.8	23.7	42.7	151.0	178.6	113.6	32.4	5.8
		1979	46.7	.8	62.3	38.0	125.3	172.7	170.7	112.6	37.8	2.4
	BERNALILLO:	1976	70.2	.7	53.7	32.4	86.8	122.1	133.3	42.5	15.8	1.7
		1977	72.7	.4	52.2	31.4	85.2	118.4	143.4	74.1	20.0	1.1
		1978	74.0	.4	51.6	30.5	85.1	126.0	138.5	78.1	14.8	1.5
		1979	77.7	.7	53.3	31.5	87.8	124.0	152.5	78.2	21.5	1.4
	SANDOVAL:	1976	107.4	1.2	75.6	46.4	133.3	205.4	203.5	80.7	43.4	4.2
3		1977	108.4	1.1	70.7	42.6	127.2	188.4	141.3	131.4	34.1	7.2
		1978	102.1	1.1	62.0	32.3	121.6	184.6	182.4	118.3	46.7	3.0
		1979	47.4	1.6	54.5	25.5	112.4	177.7	180.2	115.7	45.7	2.2
	TORRANCE:	1976	76.5	2.5	37.7	15.6	102.3	142.2	218.2	70.5	17.3	—
		1977	81.7	—	47.5	31.7	84.4	160.4	175.4	118.0	16.8	—
		1978	80.5	—	51.4	30.7	100.4	146.3	152.5	54.4	16.1	8.5
		1979	82.1	—	50.5	34.0	90.1	183.4	150.0	100.0	24.5	—
	VALENCIA:	1976	104.4	1.3	45.6	57.3	171.0	234.1	167.3	66.5	34.4	4.0
		1977	121.7	1.2	107.3	57.4	204.6	261.1	147.0	80.5	24.4	4.2
		1978	128.7	.4	107.4	54.7	202.6	261.0	228.0	88.8	30.6	5.3
		1979	128.7	.4	104.7	52.5	207.5	264.2	214.0	46.0	31.7	6.4
	CURRY:	1976	104.1	2.3	112.7	58.4	205.0	146.5	162.1	48.1	23.1	1.4
		1977	102.0	.8	111.1	61.8	145.4	146.7	155.1	50.5	12.8	5.1
		1978	102.8	.4	44.3	41.2	185.6	207.0	163.5	44.6	21.5	4.1
		1979	44.3	1.5	41.5	51.6	160.1	205.6	152.7	43.4	24.2	1.3
	4 DE BACA:	1976	64.4	—	101.1	50.0	250.0	152.2	160.7	14.2	—	—
		1977	84.2	—	45.5	14.5	157.4	234.1	181.8	57.7	47.6	—
		1978	40.7	—	104.7	44.8	315.8	311.1	145.5	14.6	15.4	—
		1979	116.3	8.0	116.3	44.8	368.4	200.0	246.3	48.0	16.1	—
	GUADALUPE:	1976	84.7	—	108.4	43.4	151.5	127.4	153.2	61.1	14.0	8.6
		1977	81.2	—	88.4	60.0	146.7	132.4	153.2	68.7	20.8	4.3
		1978	46.4	—	44.6	70.7	174.1	215.2	144.0	45.5	20.8	17.0
		1979	77.3	2.4	74.7	54.3	144.3	188.7	112.0	45.5	6.4	—

TABLE A-3
NEW MEXICO RESIDENTS
FERTILITY RATES
BIRTH RATES BY AGE OF MOTHER
BY COUNTY 1976, 1977, 1978, 1979

COUNTY		FERTILITY RATE (a)	BIRTH RATES BY AGE GROUP								
			10-14	15-19 TOTAL	15-17	18-19	20-24	25-29	30-34	35-39	40-44
(District IV Con't)											
HARDING:	1976	76.6	—	30.8	18.9	83.3	235.3	192.3	100.0	—	—
	1977	55.6	—	46.9	56.6	—	58.8	153.8	50.0	—	—
	1978	74.1	—	78.1	37.7	272.7	90.9	240.0	52.6	—	13.0
	1979	69.4	—	78.1	56.6	181.8	90.9	160.0	105.3	—	13.0
QUAY:	1976	73.4	1.6	72.9	48.9	114.4	134.2	130.0	65.6	14.9	—
	1977	72.5	—	57.7	42.7	83.3	159.5	128.4	58.4	11.0	3.0
	1978	81.8	—	99.6	61.8	165.0	152.4	124.2	48.1	25.4	3.0
	1979	82.3	3.1	77.9	50.3	125.6	178.2	120.5	70.1	14.4	1.5
ROOSEVELT:	1976	64.8	2.6	50.0	47.6	51.4	84.7	142.5	62.3	17.6	5.1
	1977	61.0	1.3	41.4	32.3	47.0	91.6	125.3	78.0	7.5	1.3
	1978	68.2	2.5	45.1	42.6	46.6	95.9	174.7	40.0	24.7	2.5
	1979	67.2	1.3	33.7	38.2	30.9	96.3	180.8	77.1	9.8	2.5
UNION:	1976	83.1	—	69.8	37.0	169.8	250.0	98.4	82.6	15.7	7.0
	1977	88.9	3.4	69.8	49.4	132.1	225.8	188.5	49.6	31.5	—
	1978	86.0	—	79.4	49.4	173.1	211.4	181.8	50.0	23.8	—
	1979	88.4	—	46.7	12.3	153.8	268.3	190.1	83.3	—	—
CATRON:	1976	129.1	—	59.5	16.4	173.9	303.6	292.3	83.3	41.7	—
	1977	152.4	—	120.5	31.7	400.0	392.9	215.4	106.4	21.3	24.2
	1978	108.9	—	84.3	63.5	150.0	145.5	281.3	85.1	42.6	—
	1979	126.1	—	36.6	15.9	105.3	254.5	281.3	127.7	63.8	8.2
GRANT:	1976	97.8	2.3	78.9	46.3	127.6	171.5	175.6	98.0	20.2	1.5
	1977	104.1	—	75.6	55.0	105.3	186.6	214.3	74.4	29.2	2.9
5	1978	102.7	—	84.8	51.7	132.3	181.8	165.8	107.2	33.5	3.6
	1979	109.0	1.5	101.6	52.9	171.7	167.3	185.4	108.3	43.9	4.3
HIDALGO	1976	152.8	—	131.9	98.8	205.5	368.8	235.7	107.1	46.2	3.5
	1977	145.6	—	138.1	85.4	253.3	351.9	213.8	91.5	37.9	6.9
	1978	147.4	—	136.4	90.4	236.8	309.1	246.9	145.8	22.6	—
	1979	128.6	—	110.7	59.5	223.7	325.3	202.5	103.4	—	3.4
LUNA:	1976	101.3	—	110.0	65.3	206.1	206.6	158.8	85.9	31.3	6.2
	1977	101.1	—	91.5	55.2	169.5	244.2	167.1	73.2	28.1	4.8
	1978	77.1	2.1	80.8	32.5	184.4	131.7	138.0	66.2	31.3	6.9
	1979	98.0	1.0	59.1	28.2	125.0	261.1	171.8	95.3	22.6	2.3
CHAVES:	1976	79.8	.7	68.4	45.3	107.0	161.6	147.4	90.6	20.4	4.3
	1977	87.0	1.0	78.4	54.7	125.6	185.1	165.3	67.5	19.3	2.3
	1978	82.1	.7	79.2	46.7	143.8	174.4	138.3	64.2	21.0	5.1
	1979	88.6	.7	84.1	54.9	142.5	[illegible]	149.8	72.7	20.1	3.1
EDDY:	1976	97.4	1.6	100.4	59.2	186.6	226.4	155.3	75.0	19.0	1.1
	1977	98.3	1.2	80.2	42.7	158.8	236.6	196.5	64.8	17.3	3.8
	1978	104.5	.4	86.4	54.8	152.7	267.4	201.0	67.2	15.7	1.5
	1979	100.8	2.0	81.4	45.0	157.7	249.1	191.8	72.5	18.8	1.9
6 LEA	1976	105.5	.3	96.4	66.6	187.2	240.2	144.7	53.5	20.4	3.5
	1977	78.9	1.6	73.2	44.8	130.3	194.0	138.5	57.8	12.7	3.5
	1978	94.2	.6	99.6	46.5	206.5	239.1	152.2	56.1	18.4	2.3
	1979	96.5	.3	100.6	51.1	200.4	232.5	178.4	55.8	14.7	2.6
LINCOLN:	1976	94.4	4.6	61.3	29.1	152.5	234.5	190.3	77.9	28.4	1.0
	1977	106.9	—	69.2	40.3	140.5	255.0	168.5	96.6	41.5	—
	1978	85.5	—	48.7	29.4	96.0	189.5	167.8	65.6	27.0	3.3
	1979	93.3	2.1	55.0	22.6	139.9	174.2	206.9	72.9	31.1	4.9
OTERO:	1976	105.7	1.9	106.6	49.8	223.6	227.8	169.9	55.6	21.0	4.0
	1977	101.5	1.9	98.6	51.6	195.3	236.7	195.3	57.6	16.1	.9
	1978	103.2	1.1	96.2	36.9	218.3	216.8	176.2	59.6	18.6	3.0
	1979	97.1	.7	77.2	35.2	163.3	212.7	177.9	50.8	17.2	3.5
DONA ANA:	1976	83.9	.8	68.9	41.8	109.2	130.0	140.8	78.0	31.0	8.9
	1977	82.1	.9	57.1	38.9	80.8	136.6	151.8	77.2	27.8	9.2
	1978	79.5	1.5	59.7	39.0	81.6	125.6	148.1	85.5	23.2	5.5
	1979	84.2	.9	54.6	32.9	83.0	137.5	163.8	86.3	29.9	3.8
7 SIERRA:	1976	87.1	.3	123.6	89.2	220.8	209.8	108.9	31.3	18.3	5.1
	1977	92.7	—	99.6	72.5	166.7	226.2	191.5	42.9	30.1	5.0
	1978	60.8	3.0	65.2	45.9	112.5	163.7	67.0	48.5	17.8	—
	1979	83.1	—	82.7	50.5	162.5	209.3	66.7	108.9	41.2	2.9
SOCORRO:	1976	115.9	1.9	120.5	78.9	180.9	181.8	211.9	81.6	26.0	13.2
	1977	133.6	1.9	115.9	90.6	151.0	299.9	233.1	128.1	15.0	8.9
	1978	134.2	—	131.5	69.3	221.1	238.8	231.1	137.5	39.1	6.7
	1979	131.7	—	128.0	99.3	169.3	231.6	229.0	113.0	19.1	9.0

HEALTH DISTRICTS

(a) Births Per 1,000 Women Ages 15-44

1976-1979 rates based upon population estimates furnished by the New Mexico Tumor Registry, University of New Mexico.

TABLE A-4
NEW MEXICO RESIDENTS
LIVE BIRTHS BY AGE OF MOTHER
1979

Percentage Distribution By Live Birth Order

COUNTY	TOTAL BIRTHS	% DISTRIBUTION BY LIVE BIRTH ORDER				
		1	2	3	4	5
DISTRICT I						
MCKINLEY:						
Total	1,625	32.8	28.7	17.8	9.1	11.6
< 15	9	100.0	—	—	—	—
15-17	115	89.3	14.8	0.9	—	—
18-19	171	62.6	27.5	8.8	1.2	—
(15-19)	286	71.3	22.4	5.6	0.7	--
20-24	559	40.6	36.7	17.0	4.3	1.4
25-29	467	16.3	33.4	25.1	14.8	10.5
30-34	216	9.7	16.7	19.4	17.6	36.6
35-39	73	1.4	6.8	23.3	15.1	53.4
40 +	20	—	—	15.0	20.0	65.0
SAN JUAN:						
Total	2,089	38.6	30.2	15.3	7.9	8.1
< 15	1	100.0	—	—	—	—
15-17	128	89.1	10.2	0.8	—	—
18-19	271	71.2	23.6	4.8	0.4	—
(15-19)	399	76.9	19.3	3.5	0.3	--
20-24	780	43.5	34.0	13.5	3.5	0.6
25-29	552	23.2	34.6	22.3	13.9	6.0
30-34	247	10.5	20.6	23.9	18.2	26.7
35-39	88	5.7	6.8	19.3	14.8	53.4
40 +	22	4.5	4.5	4.5	4.5	81.8
DISTRICT II						
COLFAX:						
Total	221	40.7	29.4	16.7	8.1	5.0
< 15	1	100.0	--	--	--	--
15-17	15	100.0	--	--	--	--
18-19	32	71.9	25.0	3.1	--	--
(15-19)	47	80.9	17.0	2.1	--	--
20-24	71	45.1	31.0	18.3	2.8	2.8
25-29	68	25.0	42.6	19.1	8.8	4.4
30-34	25	8.0	20.0	28.0	32.0	12.0
35-39	7	--	14.3	28.6	28.6	28.6
40 +	2	--	--	50.0	--	50.0
LOS ALAMOS:						
Total	193	38.3	35.2	17.6	6.7	2.1
< 15	--	--	--	--	--	--
15-17	7	100.0	--	--	--	--
18-19	8	100.0	--	--	--	--
(15-19)	15	100.0	--	--	--	--
20-24	90	57.5	35.0	7.5	--	--
25-29	65	40.0	33.8	20.0	6.2	--
30-34	51	13.7	51.0	21.6	7.8	5.9
35-39	21	19.3	28.6	33.3	19.0	9.8
40 +	1	--	--	--	100.0	--
MORA:						
Total	78	38.5	28.2	19.2	9.0	5.1
< 15	1	100.0	--	--	--	--
15-17	4	100.0	--	--	--	--
18-19	15	93.3	6.7	--	--	--
(15-19)	19	94.7	5.3	--	--	--
20-24	17	41.2	41.2	17.6	--	--
25-29	31	9.7	38.7	35.5	9.7	6.5
30-39	9	11.1	22.2	11.1	44.4	11.1
35-39	1	--	--	--	--	100.0
40 +	--	--	--	--	--	--
RIO ARRIBA:						
Total	635	39.8	30.2	17.2	7.4	5.4
< 15	1	100.0	--	--	--	--
15-17	40	92.5	7.5	--	--	--
18-19	96	79.2	17.7	3.1	--	--
(15-19)	136	83.1	14.7	2.2	--	--
20-24	213	42.7	35.2	16.0	4.2	1.9
25-29	172	18.6	41.9	29.7	6.4	3.5
30-34	73	13.7	26.0	24.7	26.0	9.6
35-39	36	16.7	16.7	5.6	22.2	38.9
40 +	4	--	--	25.0	--	75.0
SAN MIGUEL:						
Total	960	43.0	29.1	13.0	7.6	7.2
< 15	1	100.0	--	--	--	--
15-17	38	92.1	7.9	--	--	--
18-19	54	79.6	18.5	1.9	--	--
(15-19)	92	83.8	14.1	1.1	--	--
20-24	151	52.3	33.8	10.6	2.6	0.7
25-29	112	25.9	42.9	17.9	8.9	4.5
30-34	74	12.2	23.0	25.7	20.3	18.9
35-39	24	4.2	20.8	12.5	25.0	37.5
40 +	6	16.7	--	16.7	--	66.7
SANTA FE:						
Total	1,233	46.1	30.3	13.1	5.3	5.3
< 15	--	--	--	--	--	--
15-17	69	91.3	5.8	1.4	1.4	--
18-19	119	78.2	19.3	0.8	0.8	0.8
(15-19)	188	83.0	14.4	1.1	1.1	0.5
20-24	391	56.3	35.3	6.1	1.3	1.0
25-29	351	34.8	35.9	20.8	4.6	4.0
30-34	220	26.8	30.0	21.8	12.3	9.1
35-39	65	16.9	23.1	13.8	15.4	30.8
40 +	18	5.6	5.6	27.8	27.8	33.3

COUNTY	TOTAL BIRTHS	% DISTRIBUTION BY LIVE BIRTH ORDER				
		1	2	3	4	5
DISTRICT II (Cont'd						
TAOS:						
Total	398	44.5	32.2	13.8	7.0	2.5
< 15	1	100.0	—	—	—	—
15-17	29	96.6	3.4	—	—	—
18-19	45	82.2	17.8	—	—	—
(15-19)	75	87.6	12.2	--	--	--
20-24	189	48.4	39.8	10.2	1.6	—
25-29	106	34.0	39.6	17.9	8.5	—
30-34	66	18.2	30.3	28.8	18.2	4.5
35-39	20	5.0	30.0	20.0	25.0	20.0
40 +	3	—	—	—	—	100.0
DISTRICT III						
BERNALILLO:						
Total	7,179	44.9	33.0	13.7	4.7	3.7
< 15	16	100.0	—	—	—	—
15-17	408	91.7	7.8	0.5	—	—
18-19	717	77.0	19.9	2.6	0.3	0.1
(15-19)	1,125	82.5	15.6	1.9	0.2	0.1
20-24	2,493	49.9	37.3	10.1	2.0	0.6
25-29	2,279	35.4	38.0	18.3	5.4	2.8
30-34	1,005	21.3	34.7	22.6	12.2	9.2
35-39	264	14.0	22.7	22.7	14.0	26.5
40 +	97	12.8	10.6	17.0	12.8	46.8
SANDOVAL:						
Total	599	32.7	34.1	16.7	7.9	11.6
< 15	3	100.0	—	—	—	—
15-17	25	76.0	20.0	4.0	—	—
18-19	55	74.5	20.0	5.5	—	—
(15-19)	80	75.0	20.0	5.0	--	--
20-24	182	39.0	41.2	16.5	3.3	—
25-29	151	14.6	38.4	22.5	12.6	11.9
30-34	90	22.2	18.9	21.1	13.3	24.4
35-39	35	5.7	8.6	11.4	17.1	57.1
40 +	3	—	—	—	—	100.0
TORRANCE:						
Total	109	35.8	31.2	17.4	9.2	6.4
< 15	—	—	—	—	—	—
15-17	9	88.9	11.1	—	—	—
18-19	10	70.0	30.0	—	—	—
(15-19)	19	78.9	21.1	--	--	--
20-24	41	41.5	39.1	19.5	4.9	—
25-29	27	14.8	40.7	25.9	7.4	11.1
30-34	17	11.8	29.4	23.5	23.5	11.8
35-39	5	20.0	—	—	40.0	40.0
40 +	—	—	—	—	—	—
VALENCIA:						
Total	1,339	39.7	29.4	17.3	6.9	6.6
< 15	3	100.0	—	—	—	—
15-17	88	93.2	5.7	1.1	—	—
18-19	177	72.9	20.9	5.1	1.1	—
(15-19)	265	79.6	15.8	3.8	0.8	--
20-24	490	42.2	39.4	14.9	2.9	0.6
25-29	365	24.7	32.6	22.1	9.0	6.6
30-34	154	11.0	22.1	22.3	19.5	20.1
35-39	45	8.9	11.1	11.1	24.4	44.4
40 +	17	—	5.9	11.8	17.6	64.7
DISTRICT IV						
CURRY:						
Total	920	43.6	33.2	14.4	4.8	3.9
< 15	4	100.0	—	—	—	—
15-17	67	82.1	16.4	1.5	—	—
18-19	121	66.1	31.4	2.5	—	—
(15-19)	188	71.8	26.1	2.1	--	--
20-24	444	46.4	35.6	13.3	3.6	1.4
25-29	230	27.4	38.7	19.6	9.6	4.3
30-34	68	14.7	33.8	30.9	10.3	10.3
35-39	33	12.1	9.1	33.3	6.1	39.4
40 +	3	33.3	—	—	—	66.7
DE BACA:						
Total	92	38.1	31.0	16.7	9.5	4.8
< 15	1	100.0	—	—	—	—
15-17	3	66.7	33.3	—	—	—
18-19	7	85.7	14.3	—	—	—
(15-19)	10	80.0	20.0	--	--	--
20-24	9	44.4	22.2	33.3	—	—
25-29	16	12.5	31.3	25.0	18.8	12.5
30-34	5	20.0	60.0	—	20.0	—
35-39	1	—	100.0	—	—	—
40 +	—	—	—	—	—	—
GUADALUPE:						
Total	72	47.2	34.7	11.1	4.2	2.8
< 15	1	100.0	—	—	—	—
15-17	10	100.0	—	—	—	—
18-19	10	70.0	10.0	20.0	—	—
(15-19)	20	85.0	5.0	10.0	--	--
20-24	30	40.0	50.0	6.7	3.3	—
25-29	14	7.1	57.1	21.4	7.1	7.1
30-34	6	50.0	16.7	—	16.7	16.7
35-39	1	—	—	100.0	—	—
40 +	—	—	—	—	—	—

TABLE A-4
NEW MEXICO RESIDENTS
LIVE BIRTHS BY AGE OF MOTHER
1979

Percentage Distribution By Live Birth Order

COUNTY	TOTAL BIRTHS	% DISTRIBUTION BY LIVE BIRTH ORDER 1	2	3	4	5
DISTRICT IV(Cont'd)						
HARDING:						
Total	15	60.0	20.0	6.7	—	13.3
< 15	—	—	—	—	—	—
15-17	3	100.0	—	—	—	—
18-19	2	100.0	—	—	—	—
(15-19)	5	100.0	--	--	--	--
20-24	3	66.7	33.3	—	—	—
25-29	4	25.0	50.0	—	—	25.0
30-34	2	50.0	—	50.0	—	—
35-39	—	—	—	—	—	—
40 +	1	—	—	—	—	100.0
QUAY:						
Total	180	44.4	28.9	16.7	7.2	2.8
< 15	2	100.0	—	—	—	—
15-17	18	94.4	5.6	—	—	—
18-19	26	76.9	19.2	3.8	—	—
(15-19)	44	84.1	13.6	2.3	--	--
20-24	67	47.8	37.3	14.9	—	—
25-29	40	22.5	35.0	27.5	12.5	2.5
30-34	22	—	27.3	36.4	22.7	13.6
35-39	4	—	—	—	75.0	25.0
40 +	1	—	100.0	—	—	—
ROOSEVELT:						
Total	273	40.7	33.3	12.1	7.0	7.0
< 15	1	100.0	—	—	—	—
15-17	18	100.0	—	—	—	—
18-19	24	66.7	33.3	—	—	—
(15-19)	42	73.8	26.2	--	--	--
20-24	116	41.4	36.2	12.1	5.2	5.2
25-29	79	31.6	40.5	15.2	8.9	3.8
30-34	29	20.7	17.2	20.7	17.2	24.1
35-39	4	—	—	25.0	25.0	50.0
40 +	2	—	50.0	—	—	50.0
UNION:						
Total	76	40.8	32.9	18.4	5.3	2.6
< 15	—	—	—	—	—	—
15-17	2	100.0	—	—	—	—
18-19	8	62.5	37.5	—	—	—
(15-19)	10	70.0	30.0	--	--	--
20-24	33	54.5	30.3	15.2	—	—
25-29	23	26.1	39.1	26.1	8.7	—
30-34	10	—	30.0	30.0	20.0	20.0
35-39	—	—	—	—	—	—
40 +	—	—	—	—	—	—
DISTRICT V						
CATRON:						
Total	45	33.3	31.1	13.3	6.7	15.6
< 15	—	—	—	—	—	—
15-17	1	100.0	—	—	—	—
18-19	2	100.0	—	—	—	—
(15-19)	3	100.0	--	--	--	--
20-24	14	50.0	28.6	14.3	7.1	—
25-29	18	5.6	44.4	22.2	11.1	16.7
30-34	6	50.0	33.3	—	—	16.7
35-39	3	33.3	—	—	—	66.7
40 +	1	—	—	—	—	100.0
GRANT:						
Total	546	36.6	31.5	15.6	9.7	6.6
< 15	2	100.0	—	—	—	—
15-17	38	94.7	2.6	2.6	—	—
18-19	86	67.4	29.4	7.0	1.2	—
(15-19)	124	75.8	17.7	5.6	0.8	--
20-24	172	36.6	44.2	13.4	5.8	—
25-29	145	22.8	35.9	22.1	11.0	8.3
30-34	68	11.8	26.5	22.1	23.5	16.2
35-39	29	—	10.3	24.1	27.6	37.9
40 +	6	—	16.7	16.7	33.3	33.3
HIDALGO:						
Total	130	35.4	31.5	13.8	9.2	10.0
< 15	—	—	—	—	—	—
15-17	10	80.0	20.0	—	—	—
18-19	17	64.7	29.4	5.9	—	—
(15-19)	27	70.4	25.9	3.7	--	--
20-24	54	40.7	40.7	14.8	1.9	1.9
25-29	33	12.1	24.2	27.3	24.2	12.1
30-34	15	6.7	26.7	—	20.0	46.7
35-39	—	—	—	—	—	—
40 +	1	—	—	—	—	100.0
LUNA:						
Total	297	33.0	33.0	17.2	10.1	6.7
< 15	1	100.0	—	—	—	—
15-17	15	86.7	6.7	6.7	—	—
18-19	31	74.2	22.6	3.2	—	—
(15-19)	46	78.3	17.4	4.3	--	--
20-24	129	32.6	46.5	11.6	7.0	2.3
25-29	67	23.9	26.9	28.4	14.9	6.0
30-34	41	4.9	24.4	34.1	24.4	12.2
35-39	11	9.1	18.2	9.1	9.1	54.5
40 +	2	—	—	—	—	100.0

COUNTY	TOTAL BIRTHS	% DISTRIBUTION BY LIVE BIRTH ORDER 1	2	3	4	5
DISTRICT VI						
CHAVES:						
Total	922	38.4	30.9	15.9	7.6	7.2
< 15	2	100.0	—	—	—	—
15-17	96	89.6	10.4	—	—	—
18-19	125	68.8	30.4	—	0.8	—
(15-19)	221	77.8	21.7	--	0.5	--
20-24	326	36.2	41.7	16.6	4.6	0.9
25-29	222	22.1	30.6	27.5	13.1	6.8
30-34	111	9.9	26.1	24.3	18.0	21.6
35-39	30	6.7	13.3	13.3	13.3	53.3
40 +	10	—	—	10.0	10.0	80.0
EDDY:						
Total	861	40.9	30.9	17.1	5.8	5.3
< 15	5	100.0	—	—	—	—
15-17	70	92.9	7.1	—	—	—
18-19	117	75.2	17.9	5.1	0.9	0.9
(15-19)	187	81.8	13.9	3.2	0.5	0.5
20-24	338	40.8	34.3	15.7	3.6	0.6
25-29	221	20.8	34.8	26.7	7.7	5.0
30-34	81	11.1	21.0	30.9	19.8	17.3
35-39	24	4.2	8.3	12.5	16.7	58.3
40 +	5	—	—	20.0	—	80.0
LEA:						
Total	1,195	37.6	31.3	17.8	6.5	6.8
< 15	1	100.0	—	—	—	—
15-17	96	86.5	11.5	2.1	—	—
18-19	187	63.6	26.2	7.5	2.7	—
(15-19)	283	71.4	21.2	5.7	1.8	--
20-24	429	32.9	40.3	19.3	4.4	3.0
25-29	299	22.1	35.8	23.7	10.0	8.4
30-34	96	14.6	17.7	27.1	17.7	22.9
35-39	28	21.4	3.6	21.4	10.7	42.9
40 +	9	11.1	—	22.2	—	66.7
LINCOLN:						
Total	167	41.9	32.3	12.6	6.6	6.6
< 15	1	100.0	—	—	—	—
15-17	7	57.1	42.9	—	—	—
18-19	17	70.6	29.4	—	—	—
(15-19)	24	66.7	33.3	--	--	--
20-24	54	46.3	38.9	7.4	5.6	1.9
25-29	60	30.3	36.7	18.3	5.0	1.7
30-34	18	22.2	11.1	16.7	16.7	33.3
35-39	7	14.3	14.3	42.9	28.6	—
40 +	3	—	—	—	—	100.0
OTERO:						
Total	944	44.7	31.4	14.5	5.3	4.1
< 15	2	100.0	—	—	—	—
15-17	47	91.5	6.4	—	2.1	—
18-19	106	78.3	17.0	2.8	1.9	—
(15-19)	153	82.4	13.7	2.0	2.0	--
20-24	393	47.3	38.7	10.7	2.5	0.8
25-29	279	31.5	34.8	22.2	9.0	2.5
30-34	83	20.5	26.5	31.3	9.6	12.0
35-39	26	7.7	15.4	15.4	15.4	46.2
40 +	8	12.5	—	—	—	87.5
DISTRICT VII						
DONA ANA:						
Total	1,697	43.0	30.8	13.8	7.2	5.1
< 15	2	100.0	—	—	—	—
15-17	92	93.5	5.4	1.1	—	—
18-19	178	75.8	21.3	2.8	—	—
(15-19)	270	81.9	15.9	2.2	--	--
20-24	639	50.0	35.6	10.7	2.8	0.8
25-29	478	30.1	36.0	19.2	11.3	3.3
30-34	232	18.1	29.7	22.8	15.5	13.8
35-39	64	9.7	20.3	21.9	17.2	35.9
40 +	17	5.9	—	5.9	23.5	64.7
SIERRA:						
Total	99	33.3	43.4	9.1	7.1	7.1
< 15	—	—	—	—	—	—
15-17	10	100.0	—	—	—	—
18-19	13	53.8	38.5	7.7	—	—
(15-19)	23	73.9	21.7	4.3	--	--
20-24	36	25.0	63.9	5.6	5.6	—
25-29	14	28.6	42.9	21.4	7.1	—
30-34	18	11.1	33.3	16.7	16.7	22.2
35-39	7	14.3	42.9	—	14.3	28.6
40 +	1	—	—	—	—	100.0
SOCORRO:						
Total	237	44.7	29.5	16.0	10.1	9.6
< 15	—	—	—	—	—	—
15-17	27	88.9	11.1	—	—	—
18-19	32	71.9	25.0	3.1	—	—
(15-19)	59	79.7	18.6	1.7	--	--
20-24	82	40.2	34.1	15.9	8.5	1.2
25-29	60	25.0	28.3	25.0	20.0	1.7
30-34	27	29.6	7.4	29.6	14.8	18.5
35-39	5	40.0	—	20.0	20.0	20.0
40 +	4	25.0	—	—	—	75.0

TABLE A-5
NEW MEXICO
BIRTHS BY COUNTY OF OCCURRENCE
BY FACILITY AND ATTENDANT AT BIRTH
1979

COUNTY/ PLACE OF BIRTH	Total Births	ATTENDANT AT BIRTH					
		M.D.	D.O.	Lay Midwife	Nurse Midwife	R.N.	Other
STATE TOTAL	29,235	20,824	1,742	10	1,391	5	263
DISTRICT I							
MCKINLEY:	1,869	1,466	192		135	9	67
Crownpoint Indian Hospital	124	120	3				
Gallup Indian Hospital	1,035	813	186		21	1	14
Rehoboth Indian Hospital	450	331	1		112		6
McKinley General Hospital	121	73				3	45
Zuni Indian Hospital	122	121	1				
Home	8	4			2		2
Clinic & Other	4	4					
SAN JUAN:	2,115	1,573		3	528	1	19
PHS Indian Hospital	829	593		2	520	1	2
San Juan Hospital	1,267	1,262		1	3		1
Home	14	4			1		9
Clinic & Other	5	5					2
DISTRICT II							
COLFAX:	192	191					1
Colfax General Hospital	31	31					
Northern Colfax County Hosp.	159	159					
Home	2	1					1
LOS ALAMOS:	440	440					
Los Alamos Med. Center	438	438					
Home	2	2					
MORA:	1				1		
Home	1				1		
RIO ARRIBA:	316	295			16		5
Espanola Hospital	279	279					
Tierra Amarella Clinic	17	9			8		
Home	8	4			2		2
Clinic & Other	12	3			6		3
SAN MIGUEL:	520	380		1	138		1
Las Vegas Hospital	499	379			119		1
Home	20	1			19		
Clinic & Other	1			1			
SANTA FE:	1,991	1,991	28		6		16
PHS Indian Hospital	260	234	26				
St. Vincent's Hospital	1,165	1,161	1				3
Home	62	42	1		6		13
Clinic & Other	4	4					
TAOS:	298	276	1		5		16
Holy Cross Hospital	278	273	1		2		2
Home	17	3			3		11
Clinic & Other	3						3
DISTRICT III							
BERNALILLO:	8,512	7,991	475	3	501		92
Bataan Memorial Hospital	476	473					3
Bernalillo County Med. Ctr.	2,242	2,190			49		3
Lovelace Clinic	1				1		
Osteopathic Hospital Assn.	440	74	364	1	1		
Presbyterian Hospital Assn.	4,667	4,552	104		1		10
U.S. Air Force Hosp. Sandia Base	425	162	1	1	261		
S.W. Maternity Clinic	159	2	2		155		
Home	95	36	3	1	32		23
Clinic & Other	7	2	1		1		3
SANDOVAL:	106	74	1		2		29
Cuba Medical Center	94	71	1		1		21
Home	12	3			1		8
TORRANCE:	3	1		2			
Home	1	1					
Clinic & Other	2			2			
VALENCIA:	569	443	107		9		10
Cibola General Hospital	413	410					3
Pine Hill Medical Center	3	3					
Eastern Valencia Hosp.	132	26	106				
Home	14	3	1		4		6
Clinic & Other	2	1					1
DISTRICT IV							
CURRY:	892	888	2				2
Clovis Memorial Hospital	3	3					

COUNTY/ PLACE OF BIRTH	Total Births	ATTENDANT AT BIRTH					
		M.D.	D.O.	Lay Midwife	Nurse Midwife	R.N.	Other
DISTRICT IV (Continued)							
CURRY: (Continued)							
USAF Hospital, Cannon	403	400	2				1
Clovis High Plains Hosp.	484	484					
Home	1	1					
Clinic & Other	1						1
DE BACA:	88	88					
De Baca General Hospital	87	87					
Home	1	1					
GUADALUPE:	2	1	1				
Guadalupe General Hosp.	2	1	1				
HARDING:							
QUAY:	150	147					3
Tregg Memorial Hospital	147	147					
Home	3						3
ROOSEVELT:	938	99	386				3
Roosevelt General Hosp.	435	49	386				
Home	1						1
Clinic & Other	2						2
UNION:	57	57					
Union County General Hosp.	57	57					
DISTRICT V							
CATRON:	2						2
Home	2						2
GRANT:	609	602		1	1		5
Hillcrest General Hosp.	599	599					
Home	8	3		1	1		3
Clinic & Other	2						2
HIDALGO:	9						9
Home	3						3
Clinic & Other	1						1
LUNA:	315	276	38				1
Mimbres Memorial Hospital	314	276	38				
Home	1						1
DISTRICT VI							
CHAVES:	1,015	561	448				6
Eastern N.M. Medical Ctr.	995	561	434				
Memorial Osteopathic Hosp.	13		13				
Clinic & Other	1		1				
Home	6						6
EDDY:	819	815	1		1		2
Artesia General Hospital	228	228					
Guadalupe Medical Center	588	587					1
Home	3		1		1		1
LEA:	809	705	98		1		5
Eunice-Lea General Hosp.	2	2					
Hobbs-Lea General Hosp.	547	516	31				
Jal-Lea General Hosp. Unit	13	1	11				1
Llano Estacado Medical Ctr.	436	386	50				
Jal Medical Center	5		5				
Home	5		1		1		3
Clinic & Other	1						1
LINCOLN:	140	139					1
Ruidoso-Hondo Valley Gen.	138	138					
Home	2	1					1
OTERO:	908	906					2
Gerald-Champion Mem. Hosp.	626	625					1
PHS Indian Hospital	28	28					
USAF Holloman AFB Hosp.	251	251					
Home	3	2					1
DISTRICT VII							
DONA ANA:	1,309	1,289				6	14
McGee Army General Hosp.	1	1					
Memorial General Hosp.	1,283	1,281					2
Home	25	2			6		17
SIERRA:	70	67					3
St. Ann's Hospital	67	67					
Home	3						3
SOCORRO:	186	168	14				4
Socorro General Hospital	182	168	14				
Home	4						4

TABLE A-6
NEW MEXICO
1979 BIRTHS AND DEATHS
BY PLACE OF RESIDENCE

LOCATION	RESIDENT	
	Births	Deaths
DISTRICT I		
MCKINLEY COUNTY:		
Crownpoint-All	91	28
Gallup-Urban	546	148
Gallup-Rural	34	2
Rehoboth-All	9	4
Zuni-All	146	41
Other & Unspecified	799	165
COUNTY TOTAL	1,625	388
SAN JUAN COUNTY:		
Aztec-Urban	221	43
Aztec-Rural	12	2
Bloomfield-Urban	176	30
Bloomfield-Rural	8	1
Farmington-Urban	867	178
Farmington-Rural	13	2
Shiprock-All	305	60
Other & Unspecified	487	102
COUNTY TOTAL	2,089	418
DISTRICT II		
COLFAX COUNTY:		
Cimarron-All	17	6
Raton-Urban	159	90
Raton-Rural	1	—
Springer-Urban	25	15
Springer-Rural	4	—
Other & Unspecified	15	15
COUNTY TOTAL	221	126
LOS ALAMOS COUNTY:		
Los Alamos-Urban	191	56
Los Alamos-Rural	2	1
Other & Unspecified	—	3
COUNTY TOTAL	193	60
MORA COUNTY:		
Wagon Mound-All	6	8
Mora-All	17	9
Cleveland-All	8	2
Other & Unspecified	47	15
COUNTY TOTAL	78	34
RIO ARRIBA COUNTY:		
Espanola-Urban (*includes Fairview*)	171	63
Espanola-Rural (*includes Fairview*)	119	38
Chama-All	25	4
Tierra Amarilla-All	8	1
Abiquiu-All	8	1
El Rito-All	12	3
Other & Unspecified	292	116
COUNTY TOTAL	635	226
SAN MIGUEL COUNTY:		
Las Vegas-Urban	340	146
Las Vegas-Rural	11	2
Pecos-All	38	10
Other & Unspecified	71	40
COUNTY TOTAL	460	198
SANTA FE COUNTY:		
Santa Fe-Urban	1,005	363
Santa Fe-Rural	104	18
Tesuque-All	7	7
Pojoaque-All	7	3
Other & Unspecified	110	40
COUNTY TOTAL	1,233	431
TAOS COUNTY:		
Questa-All	18	11
Ranchos de Taos-All	28	12
Taos-Urban	163	57

LOCATION	RESIDENT	
	Births	Deaths
DISTRICT II *(Cont'd)*		
TAOS COUNTY:		
Taos-Rural	88	3
Penasco-All	9	1
Other & Unspecified	92	55
COUNTY TOTAL	398	139
DISTRICT III		
BERNALILLO COUNTY:		
Alameda-All	3	2
Albuquerque-Urban	6,921	2,425
Albuquerque-Rural	98	6
Sandia Base/Kirtland AFB	70	—
Other & Unspecified	137	45
COUNTY TOTAL	7,179	2,478
SANDOVAL COUNTY:		
Bernalillo-Urban	74	23
Bernalillo-Rural	3	—
Cuba-All	46	15
Pena Blanca-All	3	1
Algodones-All	6	1
Jemez Springs-All	1	4
Other & Unspecified	411	138
COUNTY TOTAL	544	182
TORRANCE COUNTY:		
Estancia-All	29	11
Moriarity-All	38	15
Mountainair-Urban	22	9
Mountainair-Rural	2	—
Other & Unspecified	18	11
COUNTY TOTAL	109	46
VALENCIA COUNTY:		
Belen-Urban	194	106
Belen-Rural	16	2
Grants-Urban	411	59
Grants-Rural	2	1
Milan-Urban	119	21
Milan-Rural	3	1
Los Lunas-Urban	224	72
Los Lunas-Rural	12	7
Other & Unspecified	358	111
COUNTY TOTAL	1,339	380
DISTRICT IV		
CURRY COUNTY:		
Clovis-Urban	733	274
Clovis-Rural	34	2
Texico-All	25	11
Melrose-All	9	13
Cannon AFB	159	8
Other & Unspecified	10	6
COUNTY TOTAL	970	314
DE BACA COUNTY:		
Ft. Sumner-Urban	31	25
Ft. Sumner-Rural	8	1
Other & Unspecified	3	1
COUNTY TOTAL	42	27
GUADALUPE COUNTY:		
Santa Rosa-Urban	58	24
Santa Rosa-Rural	—	—
Vaughn-Urban	11	2
Vaughn-Rural	—	—
Other & Unspecified	3	9
COUNTY TOTAL	72	35
HARDING COUNTY:		
Roy-All	8	4
Mosquero-All	4	2
Other & Unspecified	3	5
COUNTY TOTAL	15	11

TABLE A-6
NEW MEXICO
1979 BIRTHS AND DEATHS
BY PLACE OF RESIDENCE

LOCATION	RESIDENT	
	Births	Deaths
DISTRICT IV (Cont'd)		
QUAY COUNTY:		
Tucumcari-Urban	139	100
Tucumcari-Rural	9	1
San Jon-All	2	4
Logan-All	11	5
Other & Unspecified	19	14
COUNTY TOTAL	180	124
ROOSEVELT COUNTY:		
Portales-Urban	201	116
Portales-Rural	55	15
Other & Unspecified	17	17
COUNTY TOTAL	273	148
UNION COUNTY:		
Clayton-Urban	46	56
Clayton-Rural	4	3
Des Moines-All	4	3
Other & Unspecified	22	10
COUNTY TOTAL	76	72
DISTRICT V		
CATRON COUNTY:		
Reserve-All	17	9
Other & Unspecified	28	15
COUNTY TOTAL	45	24
GRANT COUNTY:		
Bayard-Urban	60	33
Bayard-Rural	—	—
Santa Rita-Urban	1	—
Santa Rita-Rural	—	—
Central-Urban	57	9
Central-Rural	1	—
Hurley-Urban	34	14
Hurley-Rural	1	2
Silver City-Urban	295	108
Silver City-Rural	2	—
Other & Unspecified	95	34
COUNTY TOTAL	546	200
HIDALGO COUNTY:		
Lordsburg-Urban	66	40
Lordsburg-Rural	2	2
Other & Unspecified	62	8
COUNTY TOTAL	130	50
LUNA COUNTY:		
Deming-Urban	284	157
Deming-Rural	6	8
Other & Unspecified	7	13
COUNTY TOTAL	297	178
DISTRICT VI		
CHAVES COUNTY:		
Dexter-All	68	14
Hagerman-Urban	15	8
Hagerman-Rural	1	1
Roswell-Urban	812	444
Roswell-Rural	7	5
Other & Unspecified	19	8
COUNTY TOTAL	922	480

LOCATION	RESIDENT	
	Births	Deaths
DISTRICT VI (Cont'd)		
EDDY COUNTY:		
Artesia-Urban	220	103
Artesia-Rural	39	9
Carlsbad-Urban	538	266
Carlsbad-Rural	9	3
Loving-Urban	34	18
Loving-Rural	3	—
Other & Unspecified	18	10
COUNTY TOTAL	861	409
LEA COUNTY:		
Eunice-Urban	75	27
Eunice-Rural	1	3
Hobbs-Urban	737	232
Hobbs-Rural	8	5
Jal-Urban	42	19
Jal-Rural	1	—
Lovington-Urban	247	72
Lovington-Rural	—	5
Tatum-Urban	17	10
Tatum-Rural	1	1
Other & Unspecified	16	7
COUNTY TOTAL	1,145	381
LINCOLN COUNTY:		
Capitan-All	15	13
Carrizozo-Urban	18	13
Carrizozo-Rural	—	1
Ruidoso-Urban	81	25
Ruidoso-Rural	3	2
Ruidoso Downs-All	10	8
Other & Unspecified	40	17
COUNTY TOTAL	167	79
OTERO COUNTY:		
Alamogordo-Urban	550	184
Alamogordo-Rural	3	—
Mescalero-All	67	25
Tularosa-Urban	47	34
Tularosa-Rural	1	—
Holloman AFB	186	3
Other & Unspecified	90	20
COUNTY TOTAL	944	266
DISTRICT VII		
DONA ANA COUNTY:		
Hatch-All	32	19
Las Cruces-Urban	1,030	327
Las Cruces-Rural	31	7
Mesilla-Urban	61	15
Mesilla-Rural	8	—
University Park-All	—	2
White Sands Missile Base	116	2
Other & Unspecified	419	136
COUNTY TOTAL	1,697	508
SIERRA COUNTY:		
Truth or Consequences-Urban	70	98
Truth or Consequences-Rural	3	—
Other & Unspecified	26	31
COUNTY TOTAL	99	129
SOCORRO COUNTY:		
Magdalena-Urban	41	8
Magdalena-Rural	23	—
Socorro-Urban	145	47
Socorro-Rural	7	2
Other & Unspecified	21	19
COUNTY TOTAL	237	76

TABLE A-7
AGE-SPECIFIC DEATH RATES BY COUNTY AND SEX
NEW MEXICO RESIDENTS, 1976-79 AVERAGE
UNITED STATES 1978
(Rates Per 100,000 Population)

PLACE/SEX		AGE GROUP										
		< 1	1-4	5-14	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85+
MALE												
	UNITED STATES	1591.7	78.2	41.4	173.5	192.6	313.8	797.3	1906.3	4185.4	9385.3	17258.9
	NEW MEXICO	1615.3	94.5	35.8	315.9	406.8	398.3	740.9	1842.4	4450.5	8470.9	20367.3
1	MCKINLEY	2146.6	171.1	61.0	830.5	850.5	758.4	997.5	1832.2	3170.3	7118.6	16498.3
1	SAN JUAN	1615.1	201.5	47.6	647.1	635.7	581.8	840.8	1867.3	4450.3	6078.1	14480.9
2	COLFAX	877.2	68.3	44.2	57.5	484.7	564.1	696.4	1497.6	3466.1	5515.6	15350.9
2	LOS ALAMOS	909.1	--	42.7	279.6	151.7	197.2	393.3	1316.6	2333.3	29166.7	33333.3
2	MORA	--	--	61.5	485.9	761.9	588.2	808.1	1294.5	3846.2	2807.0	31372.5
2	RIO ARRIBA	1709.4	105.2	64.7	609.2	767.3	814.6	918.6	1705.4	4100.3	7765.2	22222.2
2	SAN MIGUEL	1574.8	42.4	12.4	208.6	593.9	700.7	810.4	1694.9	3581.3	8075.6	30000.0
2	SANTA FE	1198.3	64.7	25.3	229.6	371.7	394.0	610.9	1718.4	3079.1	6422.0	16942.9
2	TAOS	1303.5	79.5	26.5	416.1	535.7	514.4	1202.3	1190.5	2440.5	4424.8	19487.2
3	BERNALILLO	1397.3	80.1	28.6	240.0	319.5	355.6	625.5	1907.3	4457.6	8871.0	20109.3
3	SANDOVAL	1500.5	136.7	65.1	406.7	899.6	729.0	913.6	1668.3	4444.4	5925.9	23332.3
3	TORRANCE	3205.1	155.0	79.6	487.0	684.3	198.4	1021.4	1333.3	2680.7	7471.3	13043.5
3	VALENCIA	2167.2	112.0	40.4	547.1	541.7	607.1	1297.1	1925.4	4695.3	9955.6	20567.4
4	CURRY	1692.7	58.0	37.8	190.7	327.1	203.5	853.8	1598.9	3904.6	9201.0	17152.1
4	DE BACA	--	--	--	--	1515.2	--	793.7	1687.8	3703.7	6392.7	24242.4
4	GUADALUPE	641.0	154.3	47.6	554.2	263.5	894.0	1172.5	1383.1	2869.8	7042.3	20370.4
4	HARDING	5555.6	--	223.7	1149.4	--	--	--	877.2	2339.2	3100.8	41666.7
4	QUAY	823.0	80.9	78.1	256.4	445.9	627.9	697.8	2267.2	4804.8	8374.4	14634.1
4	ROOSEVELT	959.2	175.7	41.9	106.1	383.1	374.0	439.2	1786.5	3413.7	8677.7	16431.9
4	UNION	4273.5	219.3	68.7	317.5	150.2	553.3	772.2	1415.7	3431.4	8181.8	20430.1
5	CATRON	5555.6	77.2	153.6	435.7	600.6	333.3	1169.6	1538.5	2867.4	10000.0	33333.3
5	DONA ANA	1296.5	77.6	45.0	175.1	253.3	218.4	742.2	1889.1	4932.8	8825.2	25507.2
5	GRANT	1119.4	--	50.2	287.0	238.6	178.8	707.5	1798.2	4924.9	10407.9	19047.6
5	HIDALGO	1234.6	161.8	--	505.1	--	231.5	751.9	2074.1	5399.1	9452.7	48484.8
5	LUNA	3903.9	53.8	50.5	241.3	336.7	419.8	640.2	1975.6	5596.1	9587.0	47222.2
5	SIERRA	2702.7	136.1	48.0	310.1	215.1	392.2	1503.1	2653.7	4179.9	6830.6	17676.8
5	SOCORRO	4232.8	--	30.3	455.3	495.7	355.4	1041.7	1569.7	6314.2	13703.7	20987.7
6	CHAVES	1578.4	177.7	5.4	381.0	418.6	345.3	732.5	2132.0	6122.4	10656.8	23008.8
6	EDDY	1789.7	49.3	27.8	288.4	399.1	324.9	603.0	1703.3	5580.6	10936.3	21604.9
6	LEA	2911.5	141.3	26.9	273.3	313.1	165.4	773.9	2047.4	5590.5	12570.1	29239.8
6	LINCOLN	911.5	--	--	578.9	339.4	546.4	601.7	1530.6	3636.4	6133.3	19753.1
6	OTERO	1348.7	36.7	17.4	300.2	390.1	370.5	911.1	143.1	6424.9	12162.2	20567.4

HEALTH DISTRICTS

TABLE A-7
AGE-SPECIFIC DEATH RATES BY COUNTY AND SEX
NEW MEXICO RESIDENTS, 1976-79 AVERAGE
UNITED STATES 1978
(Rates Per 100,000 Population)

HEALTH DISTRICTS	PLACE/SEX	AGE GROUP										
		< 1	1-4	5-14	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85+
	FEMALE											
	UNITED STATES	1269.6	59.9	26.1	60.9	79.7	167.8	433.2	976.3	2137.6	5863.1	13541.2
	NEW MEXICO	1202.5	62.9	22.0	83.4	124.8	174.8	397.5	937.1	2411.6	6028.7	17867.8
1	MCKINLEY	1530.6	123.1	38.0	197.9	230.7	405.5	661.4	1212.1	2153.1	6410.3	15902.1
1	SAN JUAN	1189.2	100.0	31.0	120.9	182.0	230.6	439.7	1064.7	2919.3	4761.9	14529.9
2	COLFAX	1449.3	--	23.5	35.9	51.6	134.6	536.2	855.9	2434.1	5219.5	18965.5
2	LOS ALAMOS	336.7	--	15.3	29.2	--	96.1	305.8	685.5	1932.4	7142.9	10526.3
2	MORA	1449.3	--	190.5	91.8	432.9	191.6	158.0	1069.5	1794.9	6306.3	20512.8
2	RIO ARRIBA	958.5	25.8	32.4	61.2	172.4	163.1	361.3	881.3	2160.9	7291.7	23744.3
2	SAN MIGUEL	990.1	134.2	37.8	77.5	26.8	90.6	472.0	747.5	1721.7	5048.1	19047.6
2	SANTA FE	837.5	83.2	12.4	92.0	162.3	171.7	389.9	627.0	2204.4	5064.2	14609.9
2	TAOS	728.6	41.5	13.0	108.2	139.2	225.2	232.6	733.9	1921.9	4137.1	18468.5
3	BERNALILLO	1131.0	45.5	15.6	57.4	113.0	160.5	373.0	830.6	2354.9	6211.0	19475.3
3	SANDOVAL	1366.1	78.3	28.2	259.8	126.5	141.1	317.7	927.8	2427.5	4602.5	20000.0
3	TORRANCE	628.9	151.5	42.0	--	--	179.2	326.0	610.8	678.0	5367.2	12280.7
3	VALENCIA	1325.5	67.9	31.2	176.7	195.7	257.4	469.5	1228.6	2843.2	7291.7	19858.2
4	CURRY	1311.2	37.3	6.4	79.8	76.6	176.3	445.8	867.4	2550.4	4538.3	13274.3
4	DE BACA	--	--	--	--	--	--	--	1118.6	2083.3	5797.1	15151.5
4	GUADALUPE	877.2	187.3	--	163.0	129.7	253.5	267.7	724.6	2395.2	8205.1	21212.1
4	HARDING	10000.0	--	--	343.6	--	--	512.8	--	1418.4	5555.6	22222.2
4	QUAY	2061.9	--	--	71.2	103.8	167.2	316.2	1089.0	1906.8	2799.0	14473.7
4	ROOSEVELT	1459.9	134.4	65.7	41.0	123.5	167.7	414.3	872.8	1542.1	5985.9	24313.7
4	UNION	952.4	--	--	197.8	276.6	472.8	366.3	711.7	2597.4	6516.3	22222.2
5	CATRON	4761.9	--	--	241.5	600.6	611.6	268.8	1488.1	2109.7	4902.0	20000.0
5	DONA ANA	1270.6	94.8	25.5	38.8	96.3	121.4	325.2	936.6	2472.2	6227.1	17326.7
5	GRANT	546.4	--	12.8	119.2	118.8	99.1	438.9	901.8	2133.3	6318.1	17375.9
5	HIDALGO	497.5	--	--	163.8	108.9	--	238.1	816.3	2109.7	9596.0	13043.5
5	LUNA	560.2	--	18.6	53.2	123.9	144.1	728.0	1122.7	3112.8	5344.6	13218.4
5	SIERRA	--	--	49.8	74.6	--	274.7	376.2	912.5	1976.1	6060.6	21951.2
5	SOCORRO	1322.8	--	--	162.6	198.4	274.3	569.1	1537.1	3255.8	8408.4	33333.3
6	CHAVES	1209.0	--	23.0	62.4	134.2	174.4	500.1	1166.0	2710.7	6056.8	16457.5
6	EDDY	756.8	133.2	42.6	82.3	103.0	153.1	269.4	1148.9	2873.1	7467.5	22666.7
6	LEA	1449.3	54.7	22.3	93.5	88.7	149.2	470.3	1159.8	3160.3	6802.7	17543.9
6	LINCOLN	952.4	232.3	--	90.5	125.8	200.0	205.1	822.4	2105.3	4793.0	20202.0
6	OTERO	1180.6	77.0	12.2	43.7	104.5	137.0	373.1	1287.8	2964.1	7925.4	18352.1

TABLE A-8
NEW MEXICO RESIDENT DEATHS
NUMBER AND CRUDE DEATH RATE BY CAUSE
1979

CAUSE OF DEATH	9TH REVISION ICDA	NUMBER	RATE PER 100,000 POPULATION
ALL CAUSES		8617	694.4
Tuberculosis (all forms)	010-018	16	1.3
Syphilis and its Sequelae	090-097	1	0.1
All other Infectious and Parasitic Diseases	001-009,020-088,098-139	72	5.8
Malignant Neoplasms	140-208	1655	133.4
Buccal Cavity and Pharynx	*140-149*	*31*	*2.5*
Digestive Organs and Peritoneum	*150-159*	*435*	*35.1*
Respiratory System	*160-165*	*369*	*29.7*
Breast	*174*	*140*	*11.3*
Genital Organs	*179-187*	*188*	*15.1*
Urinary Organs	*188,189*	*58*	*4.7*
Other and Unspecified Sites	*170-173,175,190-199*	*267*	*21.5*
Lymphatic and Hematopoietic Tissues	*200-208*	*167*	*13.5*
Diabetes	250	183	14.7
Major Cardiovascular Diseases	390-459	2866	230.9
Diseases of the Heart	*390-398,402,404-429*	*1992*	*160.5*
Active Rheumatic Fever	*390-392*	*8*	*0.6*
Chronic Rheumatic Fever	*393-398*	*31*	*2.5*
Hypertension with Heart Disease	*402,404*	*31*	*2.5*
Acute Myocardial Infarction	*410*	*480*	*38.7*
Other Ischemic Heart Diseases	*411-414*	*989*	*79.7*
Diseases of Pulmonary Circulation	*415-417*	*60*	*4.8*
Other Diseases of the Heart	*420-429*	*393*	*31.7*
Hypertension with or without Renal Disease	*401,403*	*93*	*7.5*
Cerebrovascular Disease	*430-438*	*569*	*45.9*
Arteriosclerosis	*440*	*124*	*10.0*
Other Diseases of the Circulatory System	*441-459*	*88*	*7.1*
Pneumonia	480-486	228	18.4
Influenza	487	7	0.6
Chronic Obstructive Pulmonary Diseases (COPD) and Allied Conditions	490-496	373	30.1
Bronchitis, Chronic and Unspecified	*490-491*	*8*	*0.6*
Emphysema	*492*	*88*	*7.1*
Asthma	*493*	*19*	*1.5*
Other COPD and Allied Conditions	*494-496*	*258*	*20.8*
Peptic Ulcer	531-533	30	2.4
Appendicitis	540-543	3	0.2
Hernia and Intestinal Obstruction	550-553,560	31	2.5
Cirrhosis of Liver	571	164	13.2
Nephritis, Nephrotic Syndrome, and Nephrosis	580-589	80	6.4
Complications of Pregnancy, Childbirth, and Puerperium	630-676	10	0.8
Congenital Anomalies	740-759	60	4.8
Certain Conditions Originating in the Perinatal Period	760-779	199	16.0
Symptoms, Signs, and Ill-Defined Conditions	780-799	489	39.4
All Other Diseases	Residual	734	59.1
Accidents and Adverse Effects	E800-E949	964	77.7
Motor Vehicle Accidents	*E810-E825*	*596*	*48.0*
All Other Accidents and Adverse Effects	*E800-E807,E826-E949*	*368*	*29.7*
Suicide	E950-E959	243	19.6
Homicide and Legal Intervention	E960-E978	177	14.3
All Other External Causes	E980-E999	32	2.6

TABLE A-8
NEW MEXICO RESIDENTS
SELECTED CAUSES OF DEATH BY COUNTY
1979

HEALTH DISTRICTS	COUNTY	MALIGNANT NEOPLASMS (140-208)	STOMACH (151)	LARGE INTESTINE (153)	RECTUM (154)	LIVER & BILE DUCTS (155)	TRACHEA, BRONCHUS LUNG (162-3)	BLADDER (188)	DIABETES MELLITUS (250)	HYPERTENSIVE DISEASE (401-5)	ISCHEMIC HEART DISEASE (410-14)	CEREBROVASCULAR (430-8)	INFLUENZA & PNEUMONIA (480-7)	BRONCHITIS, EMPHYSEMA ASTHMA (490-3)	CIRRHOSIS OF LIVER (571)	ACCIDENTS (E800-E949)	MOTOR VEHICLE (E810-E825)	ACCIDENTS AT WORK	ACCIDENTS AT HOME	PUBLIC NON-MOTOR VEHICLE	SUICIDE (E950-E959)	HOMICIDE (E960-E978)
	NEW MEXICO	1655	83	143	29	28	357	26	195	124	1469	569	227	115	164	964	596	31	94	243	243	177
1	MCKINLEY	35	1	1	-	3	6	-	8	4	29	14	15	1	8	101	63	2	8	28	13	9
1	SAN JUAN	52	5	7	-	2	7	-	5	2	41	21	17	3	5	95	59	3	6	27	17	13
2	COLFAX	24	2	2	-	1	2	2	3	2	26	7	3	2	3	11	7	-	1	3	6	1
2	LOS ALAMOS	14	-	2	-	-	1	-	-	-	10	3	2	-	-	10	6	-	-	4	4	1
2	MORA	10	-	-	-	-	4	-	-	-	5	1	1	-	1	4	1	-	-	3	3	1
2	RIO ARRIBA	30	4	1	-	-	5	-	5	5	37	13	5	1	4	29	19	-	2	8	11	11
2	SAN MIGUEL	43	2	3	1	1	7	1	2	-	35	13	5	1	5	18	10	-	3	5	5	6
2	SANTA FE	75	2	9	-	-	15	2	12	8	64	26	18	6	13	48	32	-	5	11	12	7
2	TAOS	27	3	1	1	-	5	-	5	-	16	11	6	2	4	20	12	-	-	8	5	4
3	BERNALILLO	567	27	50	12	4	122	14	56	36	411	164	50	29	45	215	126	8	27	54	80	62
3	SANDOVAL	26	1	3	-	-	8	-	2	3	26	13	1	1	3	34	26	2	3	3	7	6
3	TORRANCE	6	1	-	-	-	2	-	1	3	6	3	1	1	-	12	8	-	-	4	-	-
3	VALENCIA	53	5	6	1	-	10	1	4	6	35	19	9	4	7	58	44	2	2	10	9	8
4	CURRY	56	1	2	1	2	13	-	7	3	80	26	9	7	4	32	16	2	6	8	8	10
4	DE BACA	1	-	-	-	-	-	-	-	1	11	1	4	-	-	1	1	-	-	-	-	-
4	GUADALUPE	2	-	-	-	-	-	-	3	1	9	3	2	-	2	5	5	-	-	-	1	-
4	HARDING	4	-	-	-	-	1	-	-	-	4	-	-	-	1	8	2	-	-	2	1	-
4	QUAY	24	1	3	1	-	4	-	3	1	32	8	4	-	1	17	13	-	-	4	2	-
4	ROOSEVELT	28	2	3	2	-	4	-	4	6	29	16	5	1	1	4	-	-	-	-	2	-
4	UNION	11	1	2	-	-	2	-	2	1	20	2	6	1	-	-	-	-	-	-	-	-
5	CATRON	5	-	-	-	-	-	-	-	-	6	2	1	-	-	4	4	-	-	-	-	1
5	GRANT	42	-	4	-	-	9	-	8	1	36	14	8	2	7	16	9	1	2	1	4	2
5	HIDALGO	11	-	3	-	-	3	-	-	-	8	5	3	-	-	5	3	-	1	-	-	-
5	LUNA	38	1	6	1	-	7	-	4	-	42	13	5	3	4	13	11	-	2	-	4	2
6	CHAVES	115	6	9	4	4	31	2	13	5	79	34	9	15	10	37	23	1	4	9	10	7
6	EDDY	88	4	7	1	-	27	-	8	11	93	37	6	5	4	33	13	4	3	13	4	7
6	LEA	75	1	5	-	2	22	-	7	8	78	27	8	9	7	28	19	3	1	5	9	-
6	LINCOLN	18	1	1	-	-	2	-	1	-	14	7	3	1	-	3	1	-	1	1	3	4
6	OTERO	53	4	5	2	1	11	4	4	5	46	14	5	5	10	33	19	1	2	11	7	4
7	DONA ANA	93	5	6	1	3	20	-	26	11	84	39	11	5	9	53	35	1	7	10	11	9
7	SIERRA	14	-	2	-	-	2	-	2	1	36	10	4	3	6	8	1	1	1	5	3	-
7	SOCORRO	15	1	-	1	1	3	-	-	-	21	3	1	2	-	9	8	-	1	-	2	-

TABLE A-10
NEW MEXICO RESIDENTS
SELECTED CAUSES OF DEATH BY COUNTY AMONG MALES
1979

HEALTH DISTRICTS	COUNTY	MALIGNANT NEOPLASMS (140-208)	STOMACH (151)	LARGE INTESTINE (153)	RECTUM (154)	LIVER & BILE DUCTS (155)	TRACHEA, BRONCHUS LUNG (162-3)	PROSTATE (185)	BLADDER (188)	DIABETES MELLITUS (250)	HYPERTENSIVE DISEASE (401-5)	ISCHEMIC HEART DISEASE (410-14)	CEREBROVASCULAR (430-8)	INFLUENZA & PNEUMONIA (480-7)	BRONCHITIS, EMPHYSEMA ASTHMA (490-3)	CIRRHOSIS OF LIVER (571)	ACCIDENTS (E800-E949)	MOTOR VEHICLE (E810-E825)	ACCIDENTS AT WORK	ACCIDENTS AT HOME	PUBLIC NON-MOTOR VEHICLE	SUICIDE (E950-E959)	HOMICIDE (E960-E978)
	NEW MEXICO	900	37	75	17	20	258	94	17	97	62	912	262	123	82	117	723	458	31	63	171	190	141
1	MCKINLEY	20	-	-	-	3	6	1	-	1	1	22	3	10	1	4	70	41	2	5	22	12	8
1	SAN JUAN	29	2	5	-	1	7	3	-	1	2	32	14	6	3	2	76	50	3	5	18	13	10
2	COLFAX	11	-	-	-	1	1	1	2	-	-	14	4	1	2	-	8	7	-	-	1	5	1
2	LOS ALAMOS	8	-	1	-	-	1	-	-	-	-	9	2	1	-	-	7	5	-	-	2	3	1
2	MORA	2	-	-	-	-	2	-	-	-	-	4	1	1	-	1	3	1	-	-	2	1	1
2	RIO ARRIBA	14	4	-	-	1	3	3	-	2	2	21	6	4	-	4	24	16	-	2	6	9	11
2	SAN MIGUEL	29	2	3	1	-	6	3	1	1	-	20	5	3	1	5	14	8	-	2	4	3	5
2	SANTA FE	32	1	4	-	-	10	5	1	8	4	34	13	11	4	8	30	18	-	3	9	12	4
2	TAOS	15	1	-	-	-	4	2	-	3	-	12	5	4	1	3	17	10	-	-	7	4	4
3	BERNALILLO	303	9	24	6	4	91	34	8	34	17	258	74	30	20	32	157	98	8	18	33	55	48
3	SANDOVAL	16	1	3	-	-	4	2	-	1	3	18	4	1	-	2	24	18	2	2	2	7	4
3	TORRANCE	4	-	-	-	-	2	-	-	1	1	3	1	-	1	-	9	7	-	-	2	-	-
3	VALENCIA	23	3	1	1	-	5	-	1	3	4	20	8	5	2	7	47	36	2	-	9	8	6
4	CURRY	23	-	-	1	-	9	1	-	1	1	49	12	4	5	4	24	14	2	4	4	6	8
4	DE BACA	-	-	-	-	-	-	-	-	-	1	8	1	1	-	-	1	1	-	-	-	-	-
4	GUADALUPE	1	-	-	-	-	-	-	-	2	1	6	1	1	-	2	5	5	-	-	-	1	1
4	HARDING	3	-	-	-	-	1	-	-	-	-	3	-	-	-	1	-	-	-	-	-	-	-
4	QUAY	15	-	3	1	2	1	3	-	-	-	18	3	2	1	1	6	2	-	1	3	1	-
4	ROOSEVELT	14	-	1	-	-	4	3	-	-	4	23	7	3	1	1	10	7	-	-	3	2	-
4	UNION	6	-	1	-	-	1	-	-	-	1	8	1	2	-	-	2	-	-	2	-	2	-
5	CATRON	4	-	-	-	-	1	-	-	-	-	6	-	-	-	-	-	-	-	-	-	-	1
5	GRANT	20	-	2	-	-	6	-	-	5	1	24	4	6	1	3	14	8	1	2	3	3	2
5	HIDALGO	7	-	1	-	-	2	1	-	-	-	4	3	1	3	-	5	3	-	1	1	-	1
5	LUNA	22	-	5	-	-	5	4	-	1	-	26	9	2	2	4	11	9	-	2	-	3	1
6	CHAVES	27	4	7	3	2	24	5	2	6	1	50	18	3	11	8	28	18	1	2	7	10	4
6	EDDY	47	2	4	1	-	19	4	-	5	8	56	12	3	3	4	24	9	4	2	9	3	6
6	LEA	44	-	1	-	1	15	2	-	4	5	44	12	6	8	4	23	16	3	1	3	7	-
6	LINCOLN	10	1	-	-	-	1	5	-	-	-	8	3	2	1	-	3	1	-	1	1	2	4
6	OTERO	32	2	3	2	1	9	1	2	3	1	30	7	4	4	7	22	13	1	1	7	7	3
7	DONA ANA	54	4	4	1	3	15	8	-	15	3	45	22	4	4	6	47	30	1	6	10	8	7
7	SIERRA	6	-	2	-	-	1	1	-	-	1	23	7	2	1	4	5	1	1	-	3	2	-
7	SOCORRO	9	1	-	-	1	2	2	-	-	-	14	-	-	2	-	7	6	-	1	-	1	-

TABLE A-11
NEW MEXICO RESIDENTS
SELECTED CAUSES OF DEATH BY COUNTY AMONG FEMALES
1979

HEALTH DISTRICTS	COUNTY	MALIGNANT NEOPLASMS (140-208)	STOMACH (151)	LARGE INTESTINE (153)	RECTUM (154)	LIVER & BILE DUCTS (155)	TRACHEA, BRONCHUS LUNG (162-3)	BREAST (174)	CERVIX UTERI (180)	BLADDER (188)	DIABETES MELLITUS (250)	HYPERTENSIVE DISEASE (401-5)	ISCHEMIC HEART DISEASE (410-14)	CEREBROVASCULAR (430-8)	INFLUENZA & PNEUMONIA (480-7)	BRONCHITIS, EMPHYSEMA ASTHMA (490-3)	CIRRHOSIS OF LIVER (571)	ACCIDENTS (E800-E949)	MOTOR VEHICLE (E810-E825)	ACCIDENTS AT WORK	ACCIDENTS AT HOME	PUBLIC NON-MOTOR VEHICLE	SUICIDE (E950-E959)	HOMICIDE (E960-E978)
	NEW MEXICO	755	46	68	12	8	99	135	20	4	98	62	557	307	104	33	47	241	138	1	31	22	52	36
1	MCKINLEY	15	1	1	-	-	-	4	1	-	7	3	7	11	5	-	4	31	22	-	3	6	1	1
1	SAN JUAN	23	3	2	-	1	-	4	-	-	4	-	9	7	11	-	3	19	9	-	1	9	4	3
2	COLFAX	13	2	2	-	-	1	2	-	-	3	2	12	3	2	-	3	3	-	-	1	2	1	-
2	LOS ALAMOS	6	-	1	-	-	-	2	-	-	-	-	1	1	1	-	-	3	1	-	-	2	1	-
2	MORA	8	-	-	-	-	2	1	-	-	-	-	1	-	-	-	-	1	-	-	-	1	2	-
2	RIO ARRIBA	16	-	1	-	-	2	2	-	-	3	3	16	7	1	1	-	5	3	-	-	2	2	-
2	SAN MIGUEL	14	-	-	-	-	1	6	-	-	1	-	15	8	2	-	-	4	2	-	1	1	2	1
2	SANTA FE	43	1	5	-	-	5	11	2	1	4	4	30	13	7	2	5	18	14	-	2	2	-	3
2	TAOS	12	2	1	1	-	1	3	1	-	2	-	4	6	2	1	1	3	2	-	-	1	1	-
3	BERNALILLO	264	18	26	6	-	31	55	7	6	22	19	153	90	20	9	13	58	28	-	9	21	25	14
3	SANDOVAL	10	-	-	-	-	4	-	-	-	1	-	8	9	-	1	1	10	8	-	1	1	-	2
3	TORRANCE	2	1	-	-	-	-	-	-	-	-	2	3	2	1	-	-	3	1	-	-	2	-	-
3	VALENCIA	30	2	5	-	-	5	2	2	-	1	2	15	11	4	2	-	11	8	-	2	1	1	2
4	CURRY	33	1	2	-	2	4	6	1	-	6	2	31	14	5	2	-	8	2	-	2	4	2	2
4	DE BACA	1	-	-	-	-	-	-	-	-	-	-	3	-	3	-	-	-	-	-	-	-	-	-
4	GUADALUPE	1	-	-	-	-	-	-	1	-	1	-	3	2	1	-	-	-	-	-	-	-	-	-
4	HARDING	1	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-
4	QUAY	9	1	-	-	-	3	1	1	-	3	1	14	5	2	-	-	2	-	-	1	1	-	-
4	ROOSEVELT	14	2	2	2	-	-	-	2	-	4	2	6	9	2	-	-	7	6	-	-	1	-	-
4	UNION	5	1	1	-	-	1	-	-	-	2	-	12	1	4	1	-	2	-	-	2	-	-	-
5	CATRON	1	-	-	-	-	1	-	-	-	-	-	-	2	1	-	-	4	4	-	-	-	-	-
5	GRANT	22	2	2	-	2	3	5	-	-	3	-	12	10	2	1	4	2	1	-	-	1	1	-
5	HIDALGO	4	-	2	-	-	1	-	-	-	-	-	4	2	2	-	-	-	-	-	-	-	-	-
5	LUNA	16	1	1	1	-	2	6	-	-	3	-	16	4	3	2	-	2	2	-	-	-	1	1
6	CHAVES	38	2	2	1	2	7	5	1	-	7	4	29	16	6	4	2	9	5	-	2	2	-	3
6	EDDY	41	2	3	-	-	8	5	-	-	3	3	37	25	3	2	-	9	4	-	1	4	1	1
6	LEA	31	1	4	-	1	7	6	-	-	3	3	34	15	2	1	3	5	3	-	-	2	2	-
6	LINCOLN	8	-	1	-	-	1	-	-	-	1	-	6	4	1	-	-	-	-	-	-	-	1	-
6	OTERO	21	2	2	-	-	2	4	-	2	1	4	16	7	1	1	3	11	6	-	1	4	-	1
7	DONA ANA	39	1	2	-	-	3	3	1	-	11	8	39	17	7	1	3	6	5	-	1	-	3	2
7	SIERRA	8	-	-	-	-	1	1	-	-	2	-	13	3	2	2	2	3	-	-	1	2	1	-
7	SOCORRO	6	-	-	1	-	1	1	-	-	-	-	7	3	1	-	-	2	2	-	-	-	1	-

TABLE A-12
SUMMARY OF TRENDS IN NEW MEXICO HEALTH STATISTICS
NEW MEXICO RESIDENTS
1979

YEAR	POPULATION ESTIMATE MID-YEAR	BIRTHS		DEATHS		MATERNAL DEATHS		INFANT DEATHS				FETAL DEATHS	
		NUMBER	RATE	NUMBER	RATE	NUMBER	RATE	ALL INFANTS NUMBER	ALL INFANTS RATE	NEONATAL RATE	POST-NEONATAL RATE	NUMBER	RATE
1979	1,291,000	24,821	20.0	8,617	6.9	10	40.3	352	14.2	8.8	5.4	206	8.4
1978	1,212,000	23,907	19.7	8,331	6.9	2	8.4	330	13.8	8.7	5.1	199	8.3
1977	1,190,000	23,100	19.4	8,223	6.9	2	8.7	338	14.4	9.8	4.6	201	8.7
1976	1,168,000	22,180	19.0	8,204	7.0	3	13.5	347	15.6	10.0	5.6	196	8.8
1975	1,147,000	21,078	18.4	8,003	7.0	2	9.5	357	16.9	11.0	6.0	169	8.0
1974	1,122,000	21,339	19.0	8,029	7.2	10	46.8	391	18.3	12.2	6.1	184	8.6
1973	1,099,000	20,852	19.0	8,139	7.4	2	9.6	421	20.2	12.9	7.3	211	10.1
1972	1,066,000	20,813	19.5	7,877	7.4	5	24.0	403	19.4	14.4	5.0	248	11.9
1971	1,045,000	22,205	21.3	7,638	7.3	5	22.5	460	20.7	15.0	5.8	254	11.4
1970	1,017,055*	22,004	21.7	7,411	7.3	6	27.3	463	21.0	15.0	6.0	245	11.1
1969	1,011,000	21,543	21.3	7,180	7.1	5	23.2	508	23.6	16.1	7.5	266	12.3
1968	944,000	20,346	20.5	7,128	7.2	7	34.4	487	23.9	16.8	7.2	264	13.0
1967	1,000,000	21,243	21.2	6,897	6.9	4	18.8	527	24.8	16.1	8.7	249	11.7
1966	1,007,000	22,363	22.2	6,971	6.9	9	40.2	601	26.9	16.7	10.2	278	12.4
1965	1,012,000	24,352	24.1	6,801	6.7	10	41.1	657	27.0	17.8	9.2	326	13.4
1964	1,006,000	26,862	26.7	6,902	6.9	14	52.1	781	29.1	19.2	9.9	349	13.0
1963	989,000	27,820	28.1	6,837	6.9	10	35.9	848	30.5	20.0	10.5	371	13.3
1962	979,000	29,226	29.9	6,507	6.6	16	54.7	877	30.0	19.5	10.5	409	14.0
1961	965,000	30,009	31.1	6,344	6.6	19	63.3	880	29.3	20.0	9.3	370	12.3
1960	951,000*	30,747	32.3	6,503	6.8	13	42.3	1,022	33.2	20.2	13.0	414	13.5
1959	937,000	30,186	32.2	6,174	6.6	16	53.0	994	32.9	22.6	11.3	388	12.9
1958	912,000	28,698	31.5	6,088	6.7	9	31.4	1,073	37.4	22.3	15.0	389	13.6
1957	877,000	27,947	31.9	6,080	6.9	14	50.1	1,093	39.1	23.4	16.0	383	13.7
1956	830,000	26,650	32.1	5,446	6.6	10	37.5	956	35.9	22.0	13.9	405	15.2
1955	787,000	25,723	32.7	5,481	7.0	18	70.0	1,121	43.6	24.3	19.2	415	16.1
1954	767,000	25,381	33.1	5,293	6.9	28	110.3	1,087	42.8	23.8	18.9	404	15.9
1953	752,000	24,897	33.1	5,493	7.3	21	84.3	1,134	45.6	24.1	21.6	421	16.9
1952	719,000	24,059	33.5	5,369	7.5	27	112.2	1,163	48.3	26.9	21.3	417	17.3
1951	701,000	23,447	33.4	5,554	7.9	34	145.0	1,295	55.2	29.1	26.2	383	16.3
1950	681,000*	22,014	32.3	5,438	8.0	36	163.5	1,212	55.1	26.9	28.1	381	17.3

Note: Rates for Maternal Deaths are per 100,000 live births;
Rates for Infant and Fetal Deaths are per 1,000 live births;
Rates for Births and Deaths are per 1,000 population.

STATE OF NEW MEXICO

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GEORGE S. GOLDSTEIN, Ph.D.
Secretary for Health & Environment

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